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 980	0010			Rep File			CA	NDI	DAIE		COM	AITTEE	V	LUBB	1131	
Name of Filing C	ommittee, Candi	date or L	obbyist:		MET	CAL	.FE, D	ARYL	FR]	ENDS	FOR						
Street Address:	P O BOX 153	6															
City:	CRANBERRY	TWP						State	e:	PA			Zip Co	de: 16	5066		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE	-	2.	30 DA		F	POST-	3.		AMENDN REPORT		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	AY PRE	Ē- !	5.	30 DA		F	POST-	6. X		TERMINA REPORT		Yes	No	✓
report type)	ANNUAL REPORT	7.	Year 2006	i				NG MI CHEC					PAPER		\checkmark	DISKE ⁻	ΓΤΕ
Name of Office S	- Sought by Candida	ate:						DAT	ΈO	F ELE	CTIC	ON	District Number	Office Code	Part	y Code	County Code
DEDDECENTATI	VE IN THE GENE	מאו אכם	EMRI V					МО		DAY	YI	EAR		STH	REP		10
KEIKESENIAII	VE IN THE GENE	IVAL ASS	CHIBET						11		7	2006		(SEE IN	STRUCTIO	NS FOR C	ODES)
	Receipts and	МО	DAY	YEAR	2			МО		DAY	Y	EAR	FC	OR OFFI	CE USE	ONLY	
Expenditures	from:		1 1	L	1	Т	0		11	:	27	2006					
A. Amount Bro	ught Forward Fro	m Last F	eport				\$				114,	977.21					
B. Total Moneta	ary Contributions	And Red	eipts (Fron	n Sche	dule	1)	\$				12,	846.80					
C. Total Funds	Available (Sum O	f Lines A	and B)				\$				127,	824.01					
D. Total Expend	ditures (From Sch	nedule II	I)				\$				3	372.77					
E. Ending Cash	Balance (Subtra	t Line D	From Line	C)			\$:	27,4	151.24					
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	Schedu	le II)	\$					0.00					
G. Unpaid Debt	s And Obligations	s (From	Schedule I\	V)			\$					0.00			1		
				AFF	IDA	۱V	T SE	CTI	NC								
	that this report, in	-	_									_		of my kno	wledge a	ınd belie	ef , true
correct and comple																	
Sworn to and subs	cribed before me th day of	is 	_ 20				_				5	Signature	of Perso	n Submit	ting Rep	ort	
	Signat	ure					-						Prin	ted Name	•		
My Commission Ex	rpires						_						Ema	il			
	мо	D	AY	YR	_	_			_	Are	ea Coo	de	Daytin	ne Teleph	one Nur	nber	_
	a report of a can					•				_							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and bel	ief this	polit	ical	comm	ittee l	nas n	ot viola	ted ar	ny provis	ions of th	e act of J	une 3,19	37 (P.L.	1333,
Sworn to and subsc	ribed before me this day of	i	20									S	ignature	of Candid	ate		
							-						Printe	ed Name			
My Commission Exp	Signature ires						-						Ema	nil			—
	мо	D	AY	YR	ļ		-			Area	Code		D	aytime T	elephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

	·		
Name of Filing Committee or Candidate	Reporting Period		
METCALFE, DARYL FRIENDS FOR	From:	То:	11/27/2006
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			
TOTAL for the Reporting	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)		\$	346.80
TOTAL for the Reporting	Period (2)	\$	346.80
3. Contributions Received Over \$250.00 (From Part C and Part D)			
Contributions Received From Political Committees (Part C)		\$	500.00
All Other Contributions (Part D)		\$	12,000.00
TOTAL for the Reporting	Period (3)	\$	12,500.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)			
TOTAL for the Reporting	Period (4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add and totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page		\$	12,846.80

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						
			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

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	me of Filing Committee or Candidate							
METCALFE, DARYL FRIENDS FOR			Fror	n:		То):	11/27/2006
					DATE			AMOUNT
Full Name of Contributor JAMES F. EVANS				мо	DAY	YEAR		
Mailing Address 121 FRASER ROAD							\$	150.00
City VALENCIA	State	Zip Code (Plus 4)		11	3	2006		
	PA	16059						
Full Name of Contributor GERALD R. ADLER				МО	DAY	YEAR		
Mailing Address 102 HAZEL STREET							\$	100.00
City ZELIENOPLE	State	Zip Code (Plus 4)		11	13	2006		
	PA	160631082						
Full Name of Contributor JOHN DRENNAN				МО	DAY	YEAR		
Mailing Address 642 ABERDEEN RO.	AD						\$	96.80
City ELIZABETHTOWN	State	Zip Code (Plus 4)		10	29	2006		
	PA	17022						
								PAGE TOTAL
Enter Grand Total of Part A on S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	-		\$	346.80

346.80

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	J Period				
METCALFE, DARYL FRIENDS FOR	From:			То:	11/27/2006	
		DA	TE		AMOUNT	
Full Name of Contribution Committee						

Full Name of Contributing Committee PA ABC PAC	МО	DAY	YEAR			
Mailing Address 135 SHELLYLAND RO	11	4		\$ 500.00		
City MANHEIM	State Zip Code (Plus 4) PA 175458683				2006	

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

PAGE TOTAL \$500.00

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				Repo	orting Per	riod				
METCALFE, DARYL FRIENDS FOR				Fron	n:		To	o: <u>11/27/2006</u>		
					DA	ATE		AMOUNT		
Full Name of Contributor										
JOHN M. STILLEY					МО	DAY	YEAR			
Mailing 131 BLACKTHORN DR	LIVE							\$ 5,000.00		
City BUTLER	State	Zip Cod	e (Plus	4)	10	28	2006			
50.22.	PA	16001								
Employer Name SELF EMPLOYED					Occupat	i on	SELF EMPLOYED			
Employer Mailing Address/Principal Plac Business	e of	Cit	ty			State		Zip Code (Plus 4)		
Busiless										
						<u> </u>	l			
Full Name of Contributor					мо	DAY	YEAR			
DONALD B. RODGERS					1-10	5,11				
Mailing 215 EXECUTIVE DRIV	Έ							\$ 5,000.00		
City CRANBERRY TOWNSHIP	State	Zip Cod	e (Plus	4)	11	3	2006			
	PA	16066								
Employer Name SELF EMPLOYED					Occupation SELF EMPLOYED					
Employer Mailing Address/Principal Plac Business	e of	Cit	ty			State		Zip Code (Plus 4)		
Dusilless										
Full Name of Contributor								I		
PAUL M. SWEENEY					МО	DAY	YEAR			
Mailing 9013 MARSHALL ROA	D							\$ 1,000.00		
City CRANBERRY TOWNSHIP	State	Zip Cod	e (Plus	4)	10	30	2006			
	PA	16066								
Employer Name SELF EMPLOYED				Occupation SELF EMPLOYED			PLOYED			
Employer Mailing Address/Principal Plac Business	e of	Cit	ty		-	State		Zip Code (Plus 4)		
- Washings										

Full Name of Contributor VIRGIL L. KNOX	МО	DAY	YEAR			
Mailing Address 138 BUCKINGHAM DRIVE State Zip Code (Plus 4)				25	2006	\$ 1,000.00
City VALENCIA State Zip Code (Plus 4) PA 16059				23	2000	
Employer Name SELF EMPLOYED			Occupat	PLOYED		
Employer Mailing Address/Principal Plac Business	City	•	State		Zip Code (Plus 4)	

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

PAGE TOTAL\$ 12,000.00

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 Sammary r age,	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		
METCALFE, DARYL FRIENDS FOR	From:	To:	11/27/2006
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	те 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	lame of Filing Committee or Candidate				Reporting Period						
					From:			То:	То:		
					•		DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$	0.00	
City	State		Zip Code(I	Plus 4)							
Employer of Contributor	-1		•			Occupa	ation				
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution	
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00	

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period				
METCALFE, DARYL FRIENDS FOR			From			То:	11/27/2006
			DATE				AMOUNT
To Whom Paid MONTE CELLO'S			мо	DAY	YEAR		
Mailing Address CRANBERRY GARDEN PLAZA			11	7	2006	\$	53.00
City CRANBERRY TWP	State PA	Zip Code (Plus 4) 16066	Description of Expenditure PIZZA				
Fo Whom Paid NPTCO			МО	DAY	YEAR		
Mailing Address 4008 GIBSONIA RD			11	25	2006	\$	27.95
City GIBSONIA	State PA	Zip Code (Plus 4) 15044	Description of Expenditure TELEPHONE SERVICE				
To Whom Paid ARMSTRONG			МО	DAY	YEAR		
Mailing Address 437 NORTH MAIN STREET			11	25	2006	\$	39.95
City BUTLER	State PA	Zip Code (Plus 4) 16001	Description of Expenditure INTERNET SERVICE				
To Whom Paid BANK OF AMERICA			МО	DAY	YEAR		
Mailing Address PO BOX 1758			11	25	2006	\$	251.87
City NEWARK	State NJ	Zip Code (Plus 4) 07101	Description of Expenditure PAYMENT FOR MISC. CAMPAIGN CHARGES TO CREDIT CARD				

372.77