Campaign Finance Report

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

														-
Filer Identificat Number :	ion 20	06317			Report Filed B		CANDI	DATE	СОМІ	MITTEE	\checkmark	LOBI	BYIST	
Name of Filing	Committee, Cano	didate or L	obbyist:		CONKLI	N, SC	COTT FRI	ENDS OF						
Street Address:	339 KEPP F	RD												
City:	PHILIPSBU	RG					State:	PA		Zip Co	de: 16	866		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRII PRIMARY	DAY PRE	- 2.	30 DA PRIM		POST- 3		AMENDI REPORT		Yes	No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRII ELECTIO	DAY PRE N	5.	30 DA		POST- 6		TERMINATION REPORT?		Yes	No	\checkmark
report type)	ANNUAL REPO	RT 7. X	Year 200	06			NG METHO			PAPER		\checkmark	DISKE	TTE
Name of Office	⊥ Sought by Candi	date:					DATE O	F ELEC	TION	District Number	Office Code	Par	ty Code	County Code
							мо	DAY	YEAR		STH	DEN	1	14
REPRESENTAT	IVE IN THE GEN	IERAL ASS	SEMBLY				11	7	2006	i	(SEE INS	TRUCTI	ONS FOR (ODES)
Summary of	Receipts and	мо	DAY	YEAR	2		мо	DAY	YEAR	FC	OR OFFIC	E USE	ONLY	
Expenditure	s from:		1	1	1 T	0	12	31	2006					
A. Amount Bro	ought Forward F	rom Last F	Report			\$. 1	6,012.58					
B. Total Monet	tary Contribution	ns And Red	ceipts (Fr	om Sche	dule I)	\$			0.00					
C. Total Funds	Available (Sum	Of Lines A	A and B)			\$		1	6,012.58					
D. Total Exper	nditures (From S	chedule II	II)			\$			5,401.00					
E. Ending Casl	n Balance (Subtr	act Line D	From Lin	e C)		\$		1	0,611.58					
F. Value Of In	-Kind Contributio	ons Receiv	ved (From	Schedu	le II)	\$			0.00					
G. Unpaid Deb	ts And Obligatio	ons (From	Schedule	IV)		\$			0.00					
				AFF	IDAVI	T SE	CTION							
	is a Committee r	• •	-					• •						
I swear (or affirm correct and comp	i) that this report, i lete.	including th	e attached	schedules	s filed on	paper	or by elect	ronic med	ium, are to	the best o	of my knov	vledge	and beli	ef , true
Sworn to and sub	scribed before me day of	this	20						Signature	e of Perso	n Submitt	ing Rep	oort	
						-				Prin	ted Name			
My Commission E	-	ature								Ema				
	мо	D	AY	YR		-		Area	Code		ne Teleph	one Nu	mber	
Part II- If this is	a report of a ca	andidate's	authoriz	ed Comn	nittee, C	andid	ate shall	sign her	е.					
I swear (or affirm No 320) as amend) that to the best o led.	of my knowl	edge and b	elief this	political	comm	iittee has n	ot violate	d any provis	ions of th	e act of Jı	ine 3,1	937 (P.L	. 1333,
Sworn to and subscribed before me this Signature of Candidate														
	day of					-				Printe	ed Name			
	Signatu	re				-								
My Commission Ex	pires									Ema	hil			
	мо	D	YAY	YR		-		Area Co	de	D	aytime Te	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** CONKLIN, SCOTT FRIENDS OF From: To: 12/31/2006 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting 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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

PART A CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate				Reporting Period						
				From: To			:			
		·			DATE			AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4	4)							
								PAGE TOTAL		
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.								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 Candidate					Reporting Period				
			From: To):			
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address	_	_					\$	0.00	
City	State	Zip Code (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. \$ 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			Reporting Period						
				То:					
				DA	TE		A	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR		0.00	
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Secti							\$	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.)

Name of Filing Committee or Candidate				Reporting Period						
From:				om:			То:			
				DATE			AMOUNT			
Full Name of Contributor				мо	DAY	YEAR	\$	0.00		
Mailing Address										
City	State	Zip Code (Pl	ıs 4)							
Employer Name				Occupation						
Employer Mailing Address/Principal Place of Business City				•	State		Zip Code	e (Plus 4)		
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Sectio							P#	AGE TOTAL 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 Candidat	Name of Filing Committee or Candidate			Reporting Period							
				om: To:							
				DATE				AMOUNT			
Full Name				мо	DAY	YEAR	\$		0.00		
Mailing Address											
City	State	Zip Code (Plus 4)								
Receipt Description						•					
		_	.					PAGE TO	TAL		
Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.						\$		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						
CONKLIN, SCOTT FRIENDS OF	From:	То:	<u>12/31/2006</u>				
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PI	ER CONTRIBUTOR						
TOTAL for the Reporting Period (1) \$							
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	Γ F)						
TOTAL for the Reporting Pe	riod (2)	\$	0.00				
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)							
TOTAL for the Reporting Pe	riod (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, I		\$	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:			То:	
				DATE		AMOUNT		
Full Name of Contributor				DAY	YEAR			
Mailing Address		_				7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:			1					
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed S Section 2.					je,		PAGE TOTA	AL.
						\$		0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Reporting Period						
				From:		То:					
					DATE		AMOUNT				
Full Name of Contributor				мо	DAY	YEAR					
Mailing Address							\$ 0.00				
City	State	Zip Code(Plus 4)									
Employer of Contributor				Occupa	ation						
Employer Mailing Address/Principal Plac	e of Business (City	State	e Zip	Code(Plus 4)	Descri	ption of Contribution				
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kind	l Contributions D	etaile	d			PAGE TOTAL 0.00				

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or C	andidate		Reporti	ng Period						
CONKLIN, SCOTT FRIENDS O	F		From			То:	<u>12/31/2006</u>			
				DATE			AMOUNT			
To Whom Paid			мо	DAY	YEAR					
POSTMASTER										
Mailing Address POST OFFICE				11	2006	\$	78.00			
City PHILIPSBURG State Zip Code (Plus 4)				Description of Expenditure						
	PA	16866	POSTAGE							
To Whom Paid				DAY	YEAR					
SCOTT CONKLIN Mailing Address 339 KEPP F	חא		12	12	2006	\$	4,500.00			
-							-			
City PHILIPSBURG	State	Zip Code (Plus 4)	Description of Expenditure							
	PA	16866	PAYBACK 06 CANDIDATE LOAN TO CAMPAIGN							
			мо	DAY	YEAR					
FULLINGTON BUS CO.							823.00			
Mailing Address			12	21	2006	\$	823.00			
City STATE COLLEGE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
PA 16801				HARRISB	JRG					
							PAGE TOTAL			
Enter Grand Total of Expen	ditures on Page 1, Re	port Cover Page, Item D).			\$	5,401.00			