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 200	6317				Rep File			CA	NDII	DATE	ATE COMMITTEE V LOBBYIST							
Name of Filing C	Committee, Candi	date or L	obbyist:	:		CONF	KLI	N, SC	ОТТ	FRIE	NDS (OF							
Street Address:	339 KEPP RI)																	
City:	PHILIPSBUR	3							State	e:	PA			Zip Cod	le: 16	866			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FR PRIMAR		PRE-	2		30 DA PRIMA		Р	OST-	3.		AMENDM REPORT?	Yes] [lo	\	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FR ELECTION		PRE-	- 5		30 DA		Р	OST-	6.		TERMINATION REPORT?		Yes] [lo	\
report type)	ANNUAL REPOR	7. X	Year 20	006					NG ME					PAPER		\checkmark	DIS	ETTE	
Name of Office S	ought by Candid	ate:							DAT	ΕO	F ELE	CTIC	N	District Number	Office Code	Par	ty Co	e Cou	
									МО		DAY	ΥI	AR		STH	DEI	М	14	
REPRESENTATIVE IN THE GENERAL ASSEMBLY 11 7 2006 (SEE INSTRUCTIONS FOR CO										R CODES	5)								
	Receipts and	МО	DAY	,	YEAR				МО		DAY	Y	EAR	FO	R OFFI	E USE	ONL	′	
Expenditures	from:		1	1		1	T	0		12		31	2006						
A. Amount Bro	ught Forward Fro	m Last R	eport					\$				16,0	012.58						
B. Total Moneta	ary Contributions	And Rec	eipts (F	rom	Sched	lule I	I)	\$					0.00						
C. Total Funds	Available (Sum C	f Lines A	and B)					\$				16,0	012.58						
D. Total Expend	ditures (From Sc	nedule II	I)					\$				5,4	101.00						
E. Ending Cash	Balance (Subtra	ct Line D	From Li	ine C	:)			\$				10,6	11.58						
F. Value Of In-	Kind Contribution	s Receiv	ed (Froi	m Sc	hedule	e II)		\$					0.00						
G. Unpaid Debt	s And Obligation	s (From S	Schedule	e IV))			\$					0.00						
					AFFI	[DA	VI	ΓSE	CTIO	NC									
PART I - If this is	s a Committee re	port, trea	surer si	ign h	ere. If	f this	s is	a Car	ndidat	te re	port, o	candi	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, in ete.	cluding the	e attache	d sch	edules	filed	on	paper	or by e	electr	ronic m	edium	, are to t	he best of	f my knov	wledge	and b	elief , tı	rue
Sworn to and subs	cribed before me th day of	is	20									S	Signature	of Persoi	1 Submitt	ing Re	oort		_
	Signat	ure						-						Print	ted Name	<u>, </u>			
My Commission Ex	-													Emai	il				_
	мо	D	AY		YR			_			Ar	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a car	ididate's	authori	zed (Commi	ittee	, C	andid	ate sl	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.										3,									
Sworn to and subsc		5											Si	ignature o	f Candida	ate			-
	day of							-						Printo	d Name				_
	Signature							-											_
My Commission Exp	_													Emai	il				
	МО	D	AY		YR			•			Area	Code		Da	ytime T	elephor	ne Nun	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
CONKLIN, SCOTT FRIENDS OF	From:	То:	12/31/2006
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)		\$	0.00
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
All Other Contributions (Part D)		\$	0.00
TOTAL for the Reporting	Period (3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)			
TOTAL for the Reporting	g Period (4)	\$	0.00
		1	
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa		\$	0.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate valu	-			-			
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fro	om:		То	:	
		L			DATE			AMOUNT
Full Name of Contribut	ing Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•				-		DAGE 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					
			Fro	m:		To):		
					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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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			Rep	orting Pe	riod				
			Fron	n:		To	То:		
				D	ATE		ı	AMOUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus	s 4)						
Employer Name				Occupat	tion				
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Co	de (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			l	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 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		
CONKLIN, SCOTT FRIENDS OF	From:	To:	<u>12/31/2006</u>
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 Candidat	:e		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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	1				Re	porting l	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									- \$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition			
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iptio	n of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	nedule II, I	n-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	ndidate		Reporti	ng Period			
CONKLIN, SCOTT FRIENDS OF			From			То:	12/31/2006
				DATE			AMOUNT
To Whom Paid POSTMASTER			МО	DAY	YEAR		
Mailing Address POST OFFICE	E		12	11	2006	\$	78.00
City PHILIPSBURG	State PA	Zip Code (Plus 4) 16866	Descrip POSTA	otion of Exp	penditure		
To Whom Paid SCOTT CONKLIN			мо	DAY	YEAR		
Mailing Address 339 KEPP RD)		12	12	2006	\$	4,500.00
City PHILIPSBURG	State PA	Zip Code (Plus 4) 16866		otion of Exp CK 06 CAN			CAMPAIGN
To Whom Paid FULLINGTON BUS CO.	·	•	МО	DAY	YEAR		
Mailing Address			12	21	2006	\$	823.00
City STATE COLLEGE	State PA	Zip Code (Plus 4) 16801	1	otion of Exp			
Enter Grand Total of Expendi	itures on Page 1, Re	port Cover Page, Item D).			\$	PAGE TOTAL 5,401.00