Campaign Finance Report

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

| Filer Identificat | ion 8000 |)661 | | | Rep | | | CAND | IDATE | | СОМ | MITTEE | \checkmark | LOB | BYIST | | |
|--|----------------------------------|------------|----------------------|--|----------|------|-------|-------------------------|------------|----------|------------|--------------------|----------------|--------------|---------|----------|--------------|
| Number : | Committee, Candid | late or l | obbyicty | | File | | - | O REP C | <u>`ОМ</u> | | | | | | | | |
| | committee, candi | | obbyist: | | LAW | | NCL C | | .014 | | | | | | | | |
| Street Address: | | | | | | | | | | | | | | | | | |
| City: | NEW CASTLE | | | | | | | State: PA Zip Code: 161 | | | | | 101-6 | 817 | | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDA PRIMARY | ND FRIDAY PRE- 2. X 3 RIMARY | | | | NY ARY | POST- | POST- 3. | | | 1ENT ? | Yes | N | 0 | \checkmark |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRID | 2ND FRIDAY PRE- 5. 30 ELECTION EL | | | | NY FION | POST- | 6. | | TERMIN REPORT | | Yes | N | 0 | \checkmark |
| report type) | ANNUAL REPORT | 7. | Year 2007 | 7 | | | | IG METH CHECK C | | | | PAPER | | \checkmark | DISK | ETTE | |
| Name of Office | L Sought by Candida | te: | | | | | | DATE (| OF EL | ECTI | ION . | District Number | Office Code | Par | ty Code | e Cour | |
| | | | | | | | | мо | DAY | | YEAR | Number | Code | | | | - |
| | | | | | | | | 1 | 1 | 6 | 2007 | | (SEE INS | TRUCTI | ONS FOR | CODES | 5) |
| Summary of | Receipts and | мо | DAY | YEAF | R | | | мо | DAY | , I. | YEAR | FC | OR OFFIC | E USE | ONLY | | |
| Expenditure | s from: | | 1 | 1 2 | 2007 | Т | 0 | 4 | 4 | 30 | 2007 | - | | | | | |
| A. Amount Bro | ought Forward Fro | m Last R | leport | | | | \$ | L | | | 884.78 | | | | | | |
| B. Total Monet | ary Contributions | And Rec | eipts (Fro | m Sche | edule | I) | \$ | | | | 750.00 | | | | | | |
| C. Total Funds | Available (Sum O | f Lines A | and B) | | | | \$ | | | 1 | .,634.78 | | | | | | |
| D. Total Exper | iditures (From Sch | edule II | I) | | | | \$ | | | | 100.00 | | | | | | |
| E. Ending Cast | n Balance (Subtrac | t Line D | From Line | e C) | | | \$ | | | 1 | ,534.78 | _ | | | | | |
| F. Value Of In- | -Kind Contribution | s Receiv | ed (From S | Schedu | ıle II) |) | \$ | | | | 0.00 | | | | | | |
| G. Unpaid Deb | ts And Obligations | (From S | Schedule I | V) | | | \$ | | | | 0.00 | | | | | | |
| | | | | AFF | FIDA | VI | T SE | CTION | | | | | | | | | |
| PART I - If this i | is a Committee rep | ort, trea | asurer sign | here. | If thi | s is | a Car | ndidate r | eport, | , cano | didate sig | gn here. | | | | | |
| I swear (or affirm correct and comp |) that this report, inc lete. | luding the | e attached s | chedule | s filed | l on | paper | or by elec | tronic ı | mediu | m, are to | the best o | of my knov | vledge | and be | ief , tr | ·ue |
| Sworn to and sub | scribed before me thi day of | S | 20 | | | | | | | | Signature | e of Perso | n Submitt | ing Re | oort | | - |
| | Signati | | | | | | - | | | | | Prin | ted Name | | | | - |
| My Commission E | - | ile ile | | | | | | | | | | Ema | il | | | | - |
| | мо | D | AY | YR | 2 | | _ | | 4 | rea C | ode | Daytin | ne Teleph | one Nu | mber | | - |
| Part II- If this is | a report of a can | didate's | authorize | d Comr | mittee | e, C | andid | ate shall | sign | here. | 1 | | | | | | |
| I swear (or affirm No 320) as amend |) that to the best of led. | my knowl | edge and be | lief this | s politi | ical | comm | ittee has | not vio | lated | any provis | ions of th | e act of Ju | ine 3,1 | 937 (P. | L. 133 | з, |
| Sworn to and subscribed before me this | | | | | | | | | | | s | ignature | of Candida | ite | | | - |
| day of20 | | | | | | | - | | | | | Printe | ed Name | | | | - |
| | Signature | | | | | | - | | | | | | | | | | _ |
| My Commission Ex | pires | | | | | | | | | | | Ema | hil | | | | |
| | мо | D | AY | YF | R | | - | | Are | a Cod | e | D | aytime Te | elephor | e Num | ber | - |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** LAWRENCE CO REP COM From: <u>1/1/2007</u> **To:** 4/30/2007 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 50.00 \$ **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)** 700.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 700.00 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 \$ 750.00 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 | |

| Barrend Fundice or Candide or Same and the section of the section o | 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) | | | | | | | | | | |
|---|---|------------------------------------|------------------|----------|-------|--------------|-----------------|------------|------------------|--|--|
| VINITE <th colspa<="" th=""><th>Name of Filing Committee or Candio</th><th>ate</th><th></th><th>Repor</th><th>rting Po</th><th>eriod</th><th></th><th></th><th></th></th> | <th>Name of Filing Committee or Candio</th> <th>ate</th> <th></th> <th>Repor</th> <th>rting Po</th> <th>eriod</th> <th></th> <th></th> <th></th> | Name of Filing Committee or Candio | ate | | Repor | rting Po | eriod | | | | |
| INDER OF ContributorNICHOLAS C. RISKOM0DAYYEARMailing AddressZip Code (Plus 4)4132007City ELLWOOD CITYStateZip Code (Plus 4)4132007Full Name of ContributorM0DAYYEARPAUL DIELM0DAYYEARMailing AddressM0DAYYEARCity ELLWOOD CITYStateZip Code (Plus 4)4132007Full Name of ContributorM0DAYYEARDONALD FOXMailing AddressM0DAYYEARCity ELWOOD CITYStateZip Code (Plus 4)4132007Full Name of ContributorM0DAYYEARDONALD FOXMailing AddressM0DAYYEARCity ENON VALLEYStateZip Code (Plus 4)4132007Full Name of ContributorM0DAYYEARMailing AddressM0DAYYEARMailing AddressM0DAYYEARGity NEW GALLEEStateZip Code (Plus 4)4132007Full Name of ContributorM0DAYYEARMailing AddressM0DAYYEARMailing AddressM0DAYYEARMailing AddressM0DAYYEARMailing AddressM0DAYYEARMailing AddressM0DAYYEARMailing AddressM0DAYYEARMailing Address | LAWRENCE CO REP COM | | | From | : | <u>1/1/2</u> | 2007 T o |) : | <u>4/30/2007</u> | | |
| NICHOLAS C. RISKOVertexMODAYVERMailing AddressState $Zip Code (Plus 4)$ AAABCityELLWOOD CITYRate $Zip Code (Plus 4)$ AMODAYVERPAUL DIELMODAYVER $Zip Code (Plus 4)$ AABMailing AddressTZip Code (Plus 4)AAB $Zip Code (Plus 4)$ AACityELLWOOD CITYStateZip Code (Plus 4)AAMODAYVERPA16117MODAYVER $Zip Code (Plus 4)$ AAACityELNWOOD CITYStateZip Code (Plus 4)AAB $Zip Code (Plus 4)$ AAMailing AddressMODAYVER $Zip Code (Plus 4)$ AAAAFull Name of Contributor HELEN JACKSONStateZip Code (Plus 4) 16141AAB $Zip Code (Plus 4)$ AAMailing AddressMailing AddressMODAYVER $Zip Code (Plus 4)$ AAAFull Name of Contributor NORMAN D EGIDIOStateZip Code (Plus 4) 16107AMODAYVERMailing AddressMailing AddressMODAYVER $Zip Code (Plus 4)$ AAAFull Name of Contributor NORMAN D EGIDIOFaZip Code (Plus 4) 16107AAAAAMailing AddressFaZip Code (Plus 4) 16107 | | | | | | DATE | | | AMOUNT | | |
| NICHOLAS C. RISKOKaite Mailing AddressZip Code (Plus 4) 16117And PAIn 16117And PAAnd PA | Full Name of Contributor | | | | мо | DAY | VEAD | | | | |
| CityELLWOOD CITYState PAZip Code (Plus 4) 161174132007Ful Name of Contributor PAUL DIELInfinityMODAYYEAR PAYEAR PAName of Contributor PAName of Contributor | NICHOLAS C. RISKO | | | | MO | DAT | TEAK | | | | |
| Interm PAInterm 16117Interm< | | - | 1 | | | | | \$ | 100.00 | | |
| Image of Contributor PAUL DIELMODAYYEAR YEARMOState PAZip Code (Plus 4) 161174132007Full Name of Contributor DONALD FOXState PAZip Code (Plus 4) 161174132007Full Name of Contributor DONALD FOXState PAZip Code (Plus 4) 161204132007Full Name of Contributor HELEN JACKSONState PAZip Code (Plus 4) 161204132007Full Name of Contributor HELEN JACKSONState PAZip Code (Plus 4) 161414132007Full Name of Contributor HELEN JACKSONState PAZip Code (Plus 4) 161414132007Full Name of Contributor NORMAN DEGIDIOState PAZip Code (Plus 4) 161414132007Full Name of Contributor NORMAN DEGIDIOState PAZip Code (Plus 4) 161074132007Full Name of Contributor NORMAN DEGIDIOState PAZip Code (Plus 4) 161074132007Full Name of Contributor NORMAN DEGIDIOState PAZip Code (Plus 4) 161074132007Full Name of Contributor NORMAN SCHAEFFERState PAZip Code (Plus 4) 161074132007Full Name of Contributor PAInfoMODAYYEAR 13YEAR 100.00Full Name of Contributor PAState PAZip Code (Plus 4) 161074132007Full Name of Contributor PAI | City ELLWOOD CITY | | | •) | 4 | 13 | 2007 | | | | |
| PAUL DIELMODAYYEARMolAddressXYEARMailing AddressZip Code (Plus 4)A132007CityELLWOOD CITYStateZip Code (Plus 4)APADONALD FOXMODAYYEARMoling AddressXYEARYEARCityENON VALLEYStateZip Code (Plus 4)A132007Full Name of ContributorPAZip Code (Plus 4)APAPAMoling AddressMODAYYEARYEARFull Name of ContributorPAZip Code (Plus 4)APAPAMailing AddressStateZip Code (Plus 4)APAPACityNEW GALILEEStateZip Code (Plus 4)APAPAMailing AddressMODAYYEARYEARYEARMailing AddressStateZip Code (Plus 4)APAPACityNEW GASTLEStateZip Code (Plus 4)APAPAMoling AddressNEW CASTLEStateZip Code (Plus 4)APAPAMailing AddressNEW CASTLEStateZip Code (Plus 4)PAPAPAPAMailing AddressMeAPAPAPAPAPAPAMoling AddressNEW CASTLEStateZip Code (Plus 4)PAPAPAPAMailing AddressNEW CASTLEStateZip Code (Plus 4)PAPAPA | | PA | 16117 | | | | | | | | |
| Mailing AddressState PAZip Code (Plus 4) 161174132007\$100.00CityELLWOOD CITYState PAZip Code (Plus 4) 161174132007\$100.00Full Name of Contributor DONALD FOXState PAZip Code (Plus 4) 161204132007\$100.00Full Name of Contributor HELEN JACKSONState PAZip Code (Plus 4) 161204132007\$100.00Full Name of Contributor HELEN JACKSONState PAZip Code (Plus 4) 161414132007\$100.00Full Name of Contributor HELEN JACKSONState PAZip Code (Plus 4) 161414132007\$100.00Full Name of Contributor NORMAN DEGIDIOState PAZip Code (Plus 4) 161414132007\$100.00Full Name of Contributor NORMAN DEGIDIOState PAZip Code (Plus 4) 161074132007\$100.00Full Name of Contributor WILLIAM SCHAEFFERState PAZip Code (Plus 4) 161074132007\$100.00Full Name of Contributor WILLIAM SCHAEFFERState PAZip Code (Plus 4) 161074132007\$100.00Full Name of Contributor WILLIAM SCHAEFFERState PAZip Code (Plus 4) 161074132007\$100.00Full Name of Contributor FRANK SU/VESTERState PAZip Code (Plus 4) 16107413 <td></td> <td></td> <td></td> <td></td> <td>мо</td> <td>DAY</td> <td>YEAR</td> <td></td> <td></td> | | | | | мо | DAY | YEAR | | | | |
| $ \begin{array}{c c c c c c } \hline City & ELLWOOD CITY & State & Zip Code (Plus 4) \\ PA & 16117 & PA & 16117 & PA & P$ | | | | | | | | | 100.00 | | |
| Indication of the section of the s | | State | Zin Code (Plus 4 | <u>.</u> | 4 | 13 | 2007 | \$ | 100.00 | | |
| $\begin{array}{c c c c c c } \hline \begin{tabular}{ c c c } \hline DONALDFOX & MO & DAY & YEAR \\ \hline Mailing Address & I & I & I & I & I & I & I & I & I &$ | | | | , | | | 2007 | | | | |
| DONALD FOXIndexIndexIndexIndexIndexIndexMailing AddressState PAZip Code (Plus 4) 16120AAAAAFull Name of Contributor HELEN JACKSONIndexIndexMODAYPAR PAPAR | Full Name of Contributor | • | • | | MO | DAY | VEAD | | | | |
| CityENON VALLEYState PAZip Code (Plus 4) 161204132007Full Name of Contributor HELEN JACKSON PA FUP MO DAY $YEAR$ $TABYEARTAB$ | DONALD FOX | | | | мо | DAT | TEAR | | | | |
| Initial and the part of contributor HELEN JACKSONPAInitial Contributor HELEN JACKSONPA | Mailing Address | - | | | | | | \$ | 100.00 | | |
| Full Name of Contributor HELEN JACKSONImage: Contributor HELEN JACKSONMoDAYYEAR PA <t< td=""><td>City ENON VALLEY</td><td>State</td><td>Zip Code (Plus 4</td><td>)</td><td>4</td><td>13</td><td>2007</td><td></td><td></td></t<> | City ENON VALLEY | State | Zip Code (Plus 4 |) | 4 | 13 | 2007 | | | | |
| HELEN JACKSONMoDAYYEARMiling AddressStateZip Code (Plus 4)4132007CityNEW GALILEEStateZip Code (Plus 4)4132007Full Name of ContributorPA16141MoDAYYEARNORMAN DEGIDIOStateZip Code (Plus 4)4132007Mailing AddressFallZip Code (Plus 4)4161072007CityNEW CASTLEStateZip Code (Plus 4)4132007Full Name of ContributorPAZip Code (Plus 4)4132007Full Name of ContributorPAZip Code (Plus 4)4132007Full Name of ContributorFallZip Code (Plus 4)4132007Full Name of ContributorPAZip Code (Plus 4)4132007Full Name of ContributorFall SizeZip Code (Plus 4)4132007Full Name of ContributorFall SizeZip Code (Plus 4)4132007Full Name of ContributorFall Size< | | PA | 16120 | | | | | | | | |
| Mailing AddressState PAZip Code (Plus 4) 16141AABABA100.00Full Name of Contributor NORMAN DEGIDIOPAIn 1041In 1041 <td>Full Name of Contributor</td> <td></td> <td></td> <td></td> <td>мо</td> <td>DAY</td> <td>YEAR</td> <td></td> <td></td> | Full Name of Contributor | | | | мо | DAY | YEAR | | | | |
| CityNEW GALILEEStateZip Code (Plus 4) 161414132007Full Name of Contributor NORMAN DEGIDIO | HELEN JACKSON | | | | | | | | | | |
| New of contributor NORMAN DEGIDIOPA16141Image: Contributor Maining AddressMODAYYEAR YEARYEAR PAMODAYYEAR PAPEA | | | | | 4 | 10 | 2007 | \$ | 100.00 | | |
| Full Name of Contributor NORMAN DEGIDIONORSupportNORNORDAYYEAR YEAR 2007NEAR YEAR PANOR <td>City NEW GALILEE</td> <td></td> <td></td> <td>•)</td> <td>4</td> <td>15</td> <td>2007</td> <td></td> <td></td> | City NEW GALILEE | | | •) | 4 | 15 | 2007 | | | | |
| NORMAN DEGIDIOMODAYYEARMailing AddressStateZip Code (Plus 4)A1132007CityNEW CASTLEStateZip Code (Plus 4)A1132007Full Name of ContributorPA16107DAYYEARWILLIAM SCHAEFFERMODAYYEARYEARMailing AddressStateZip Code (Plus 4)A132007CityNEW CASTLEStateZip Code (Plus 4)A132007Full Name of ContributorPA16107A132007Full Name of ContributorPAI6107AA132007Full Name of ContributorFRANK SYLVESTERMODAYYEAR100.00FRANK SYLVESTERStateZip Code (Plus 4)A1320074Mailing AddressStateZip Code (Plus 4)A132007 | | FA | 10141 | | | | | | | | |
| Mailing AddressState PAZip Code (Plus 4) 16107AAB2007 100.00 Full Name of Contributor WILLIAM SCHAEFFER PA 16107 PA | | | | | мо | DAY | YEAR | | | | |
| CityNEW CASTLEState PAZip Code (Plus 4) 161074132007Full Name of Contributor WILLIAM SCHAEFFERMODAYYEAR PAYEAR TO 1000000000000000000000000000000000000 | | | | | | | | ¢ | 100.00 | | |
| PA16107Image: constraint of contributorPAPAPAPAPAWILLIAM SCHAEFFERImage: constraint of contributorImage: constraint of co | | State | Zip Code (Plus 4 |) | 4 | 13 | 2007 | ļ | 100.00 | | |
| WILLIAM SCHAEFFERMODAYYEARMailing AddressTTTTCityNEW CASTLEStateZip Code (Plus 4)AT2007FFull Name of ContributorPA16107MODAYYEARFTTTFRANK SYLVESTERMODAYYEARTT <th< td=""><td></td><td>PA</td><td>16107</td><td></td><td></td><td></td><td></td><td></td><td></td></th<> | | PA | 16107 | | | | | | | | |
| WILLIAM SCHAEFFERIndext of the second se | Full Name of Contributor | • | • | | мо | DAY | VEAD | | | | |
| City NEW CASTLE State Zip Code (Plus 4) 4 13 2007 PA 16107 PA 16107 PA PA <td< td=""><td>WILLIAM SCHAEFFER</td><td></td><td></td><td></td><td>MO</td><td>DAT</td><td>TEAK</td><td></td><td></td></td<> | WILLIAM SCHAEFFER | | | | MO | DAT | TEAK | | | | |
| Full Name of Contributor PA 16107 MO DAY YEAR FRANK SYLVESTER Image: Contributor Image | Mailing Address | | 1 | | | | | \$ | 100.00 | | |
| Full Name of Contributor MO DAY YEAR FRANK SYLVESTER | City NEW CASTLE | | |) | 4 | 13 | 2007 | | | | |
| FRANK SYLVESTER MO DAY YEAR Mailing Address | | PA | 16107 | - | | | | | | | |
| Mailing Address State Zip Code (Plus 4) 4 13 2007 \$ 100.00 | | | | | мо | DAY | YEAR | | | | |
| City NEW CASTLE State Zip Code (Plus 4) 4 13 2007 | | | | | | | | ¢ | 100.00 | | |
| | | State | Zip Code (Plus 4 |) | 4 | 13 | 2007 | | 100.00 | | |
| | | PA | | | | | | | | | |

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 | | | | | | |
|---------------------------------------|-------------|---------|------------------|-----|------------|------|----|--------|--|
| | | | | To: | | | | | |
| | | | | 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 Sched | age, Sectio | n 3. | | | \$ | 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 Re | | | | eporting Period | | | | | |
|--|---------------------|---------------|--------|-----------------|-------|------|----------|--------------------------|--|
| | | | From | n: | | Тс |): | | |
| | | | | D | ATE | | AM | IOUNT | |
| Full Name of Contributor | | | | мо | DAY | YEAR | \$ | 0.00 | |
| Mailing Address | | | | | | | | | |
| City | State | Zip Code (Plu | s 4) | | | | | | |
| Employer Name | | | | Occupation | | | | | |
| Employer Mailing Address/Principal Plac | e of Business | City | | | State | | Zip Code | e (Plus 4) | |
| Enter Grand Total of Part C on Sche | dule I, Detailed Su | ummary Page, | Sectio | on 3. | | | 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 Candidate | | | Report | ing Peric | d | | | | |
|---------------------------------------|----------------------|------------|---------|-----------|-----|------|----|---------|------|
| | | | From: | | | То: | | | |
| | | | | D | ATE | | | AMOUNT | r |
| Full Name | | | | мо | DAY | YEAR | \$ | | 0.00 |
| Mailing Address | | | | | | | | | |
| City | State | Zip Code (| Plus 4) | | | | | | |
| Receipt Description | · | • | | | | | • | | |
| | | - | o .: | | | | | PAGE TO | TAL |
| Enter Grand Total of Part E on Sched | ule 1, Detailed Sumr | nary 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 | | |
|---|------------------|----------------------------|------------------|
| LAWRENCE CO REP COM | From: | <u>1/1/2007</u> To: | <u>4/30/2007</u> |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P | ER CONTRIBUTOR | | |
| TOTAL for the Reporting Pe | riod (1) | \$ | 0.00 |
| 2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR | T 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, 1 | | \$ | 0.00 |

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

| Name of Filing Committee or Candidate Re | | | Reporting | Period | | | | |
|--|--------------------|-------------------|-----------|----------|------|----------|-----------|------|
| Fr | | | | | | To: | | |
| | | | | 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 Sched Section 2. | ule II, In-Kind Co | ontributions Deta | iled Sum | mary Pag | ie, | | PAGE TOTA | L |
| | | | | | | \$ | | 0.00 |

PAGE 11

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

| Name of Filing Committee or Candidate | | | | Reporting Period | | | | | |
|--|------------------|-------------------|--------|------------------|--------------|--------|---------------------------|--|--|
| | | | | om: | | 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 | Stat | e Zip | Code(Plus 4) | Descri | ption of Contribution | | |
| Enter Grand Total of Part G on Sch Summary Page, Section 3. | edule II, In-Kin | d Contributions D | etaile | ed | | | PAGE TOTAL 0.00 | | |

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | | | | Reporting Period | | | | | |
|---------------------------------------|-------|-------------------|------------------|------------------|----------|----|------------|--|--|
| LAWRENCE CO REP COM | From | <u>1/</u> | <u>4/30/2007</u> | | | | | | |
| | | | | DATE | | | AMOUNT | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | |
| COM. TO ELECT MAYOR ALEXANDER | | | | | | | | | |
| Mailing Address | | | 3 | 27 | 2007 | \$ | 100.00 | | |
| City NEW CASTLE | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | |
| | PA | 16101 | DONAT | ION | | | | | |
| | | | | | | | PAGE TOTAL | | |
| Enter Grand Total of Expenditures | D. | | | \$ | 100.00 | | | | |