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 8 | 30006 | 661 | | | | port ed B | | CANDI | DATE | | СОМ | 4ITTEE | ✓ | LOB | BYIST | | |
|---|-----------------------------|----------|-----------|------------------------|---------|--------|--------------|----------------|-------------|----------|-----------|-----------|--------------------|----------------|----------|----------|----------|----------|
| Name of Filing C | Committee, Ca | ndida | te or Lo | obbyist: | | LAW | /REI | NCE C | O REP CO | DM . | | | | | | | | |
| Street Address: | 1105 DEV | NEY A | AVE | | | | | | | | | | | | | | | |
| City: | NEW CAS | TLE | | | | | | | State: | PA | | | Zip Cod | ie: 16 | 5101-6 | 817 | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | | 1. | 2ND FRIDAY PRIMARY | Y PRE | - | 2. X | 30 DA PRIMA | | POST- | 3. | | AMENDM REPORT? | | Yes | No | • | \ |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | | 4. | 2ND FRIDAY ELECTION | y pre | ≣- | 5. | 30 DA ELECT | | POST- | 6. | | TERMINA REPORT? | | Yes | No | • | \ |
| report type) | ANNUAL REP | ORT | 7. | Year 2007 | | | | | IG METHO | | | | PAPER | | V | DISKE | TTE | |
| Name of Office S | Sought by Can | didate | e: | | | _ | | | DATE O | F ELE | CTIO | N | District Number | Office Code | Par | ty Code | Coun | |
| | , | | | | | | | | МО | DAY | YE | AR | rumber | Couc | l | | Couc | |
| 11 6 2007 (SEE INS | | | | | | | | | | ISTRUCTI | ONS FOR (| CODES |) | | | | | |
| Summary of Expenditures | | d | МО | DAY | YEAR | 2 | | _ | МО | DAY | YE | AR | FO | R OFFI | CE USE | ONLY | | |
| | | | | 1 1 | 2 | 007 | I | 0 | 4 | : | 30 | 2007 | | | | | | |
| A. Amount Bro | ught Forward | From | Last Re | eport | | | | \$ | | | 8 | 84.78 | | | | | | |
| B. Total Monet | ary Contribution | ons A | nd Rece | eipts (From | Sche | dule | ı) | \$ | | | 7 | 50.00 | | | | | | |
| C. Total Funds | Available (Sui | m Of I | Lines A | and B) | | | | \$ | | | 1,6 | 34.78 | | | | | | |
| D. Total Expen | ditures (From | Sche | dule III | 1) | | | | \$ | | | 1 | 00.00 | | | | | | |
| E. Ending Cash | Balance (Sub | tract | Line D | From Line (| 2) | | | \$ | | | 1,5 | 34.78 | | | | | | |
| F. Value Of In- | Kind Contribut | tions | Receive | ed (From So | chedu | le II | [) | \$ | | | | 0.00 | | | | | | |
| G. Unpaid Debt | s And Obligat | ions (| From S | chedule IV |) | | | \$ | | | | 0.00 | | | • | | | |
| | | | | | AFF | IDA | ٩VI | T SE | CTION | | | | | | | | | |
| PART I - If this is | | - | - | _ | | | | | | - | | _ | | | | | | |
| I swear (or affirm) correct and comple | | t, inclu | iding the | attached sch | nedules | s file | d on | paper (| or by elect | ronic m | edium | are to t | he best o | f my kno | wledge | and beli | ef , trı | ue. |
| Sworn to and subs | cribed before m | e this | | 20 | | | | | | | s | ignature | of Perso | n Submit | ting Re | ort | | - |
| | | | | | | | | - - | | | | | Prin | ted Name | e | | | _ |
| My Commission Ex | - | gnature | е | | | | | | | | | | Ema | il | | | | - |
| • | мо | | DA | ΛΥ | YR | | | - | | Are | ea Cod | e | | e Telepi | none Nu | mber | | - |
| Part II- If this is | a report of a | candi | idate's a | authorized | Comn | nitte | e, C | andida | ate shall | sign he | ere. | | | | | | | |
| I swear (or affirm) No 320) as amende | | t of my | y knowle | dge and beli | ef this | polit | tical | commi | ittee has n | ot viola | ted an | y provisi | ions of the | e act of J | une 3,1 | 937 (P.L | . 1333 | 3, |
| Sworn to and subsc | ribed before me | this | | | | | | | | | | Si | ignature o | of Candid | ate | | | - |
| | day of | | | | | | | _ | | | | | | -1 NI- | | | | _ |
| | Signat | ture | | | | | | - | | | | | Printe | d Name | | | | |
| My Commission Exp | _ | .ui E | | | | | | | | | | | Ema | il | | | | _ |
| | мо |) | DA | ΛΥ | YR | 1 | | • | | Area | Code | | Da | aytime T | elephor | e Numb | er | - |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| Detailed Summary 1 age | | | | |
|--|-----------|---------|--------------|-----------|
| Name of Filing Committee or Candidate | Reporting | Period | | |
| LAWRENCE CO REP COM | From: | 1/1/200 | <u>7</u> To: | 4/30/2007 |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor | | | | |
| TOTAL for the Reporting | Period | (1) | \$ | 50.00 |
| 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) | | | \$ | 700.00 |
| 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 |
| 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 | Period | (4) | \$ | 0.00 |
| 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 Page | | | \$ | 750.00 |

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

| Name of Filing Committee or Candidate | | | | ng Period | | | |
|---------------------------------------|---------------|-------------------|-------|-----------|------|----|--------|
| | | | From: | | То | : | |
| | | I | | DATE | | | AMOUNT |
| Full Name of Contribut | ing Committee | | 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 |

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 | e | | Rep | orting Po | eriod | | |
|--|--------------------|-----------------------------------|------|-----------|-------|-----------------|------------------|
| LAWRENCE CO REP COM | | | Fror | n: | 1/1/2 | 2007 T o | <u>4/30/2007</u> |
| | | | | | DATE | | AMOUNT |
| Full Name of Contributor NICHOLAS C. RISKO | | | | мо | DAY | YEAR | |
| Mailing Address 120 MARTIN AVE. | | | | | | | \$ 100.00 |
| City ELLWOOD CITY | State PA | Zip Code (Plus 4) 16117 | | 4 | 13 | 2007 | |
| Full Name of Contributor PAUL DIEL | | | | мо | DAY | YEAR | |
| Mailing Address 925 SKYLINE DR. City FLLWOOD CITY | State | Zip Code (Plus 4) | | 4 | 13 | 2007 | \$ 100.00 |
| CITY ELLWOOD CITY | РА | 16117 | | | | | |
| Full Name of Contributor DONALD FOX | | | | МО | DAY | YEAR | |
| Mailing Address 441 PETERSBURG I | RD. | | | | | | \$ 100.00 |
| City ENON VALLEY | State PA | Zip Code (Plus 4) 16120 | | 4 | 13 | 2007 | |
| Full Name of Contributor HELEN JACKSON | | | | МО | DAY | YEAR | |
| Mailing Address 367 JACKSON LANE | | The Code (Blood) | | 4 | 13 | 2007 | \$ 100.00 |
| City NEW GALILEE | State PA | Zip Code (Plus 4) 16141 | | | | | |
| Full Name of Contributor NORMAN DEGIDIO | | | | МО | DAY | YEAR | |
| Mailing Address 13 E. EDISON AVE | | | | | | | \$ 100.00 |
| City NEW CASTLE | State PA | Zip Code (Plus 4) 16107 | | 4 | 13 | 2007 | |

| Full Name of Contributor WILLIAM SCHAEFFER | | | мо | DAY | YEAR | | |
|--|--------------------|-----------------------------------|----|-----|--------|----|--------|
| Mailing Address 1105 DEWE | | | | \$ | 100.00 | | |
| City NEW CASTLE | State PA | Zip Code (Plus 4) 16107 | 4 | 13 | 2007 | | |
| Full Name of Contributor FRANK SYLVESTER | | | МО | DAY | YEAR | | |
| | | | | | | l | |
| Mailing Address RD #2 BOX | 459 | | 4 | 13 | 2007 | \$ | 100.00 |

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

PAGE TOTAL \$ 700.00

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 | Name of Filing Committee or Candidate Rep | | | | | | | |
|---------------------------------------|---|----------|-------------|------|-----|------|----|------------|
| | | | From: | | | То: | | |
| | | | | DA | TE | | А | MOUNT |
| Full Name of Contributing Committee | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Cod | e (Plus 4) | | | | | |
| | | | | | | | | PAGE TOTAL |
| Enter Grand Total of Part C on Scheo | dule I, Detailed Sum | nmary 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 | | | | orting Pe | riod | | | | |
|---|---------------------|---------------|---------|-----------|-------|------|----------|----------------------|--|
| | | | Fron | From: To: | | | | | |
| | | | | D | ATE | | АМО | DUNT | |
| Full Name of Contributor | | | | МО | DAY | YEAR | | | |
| Mailing Address | | | | | | | \$ | 0.00 | |
| City | State | Zip Code (Plu | 5 4) | | | | | | |
| Employer Name | | | | Occupat | tion | | | | |
| Employer Mailing Address/Principal Plac Business | e of | City | | | State | | Zip Code | (Plus 4) | |
| Enter Grand Total of Part C on Sche | dule I, Detailed Su | ummary Page, | Section | on 3. | | | PAG | GE 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 Car | ndidate | | Report | ing Perio | od | | | |
|---------------------------------|----------------------|----------------|---------|-----------|-----|------|----|-----------|
| | | | From: | | | To: | | |
| | | | | D | ATE | | А | MOUNT |
| Full Name | | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Code (| Plus 4) | | | | | |
| Receipt Description | · | · | | | | | | |
| Enter Grand Total of Part E on | Schedule T. Detailed | d Summary Page | Section | 4 | | | P | AGE TOTAL |
| | 2, 200 0000 | | 22300 | | | | \$ | 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: | 4/30/2007 |
| 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 | Name of Filing Committee or Candidate Ro | | | | | | | |
|------------------------------------|--|-----------------------|----------|----------|------|-----------|------------|--|
| | | | 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 | ge, | | PAGE TOTAL | |
| Section 2. | | | | | | \$ | 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 | | | | | porting | Period | | | |
|---|---------------------------------------|---------|------------|---------|--------|-----------|-----------|--------|-------|------------------------|
| | | | | | Fro | om: | | 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 |

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | | | Reporting Period | | | | |
|--|-------|-------------------|----------------------------|-----|------|------------------|--------|
| LAWRENCE CO REP COM | | From | <u>1/1/2007</u> T | | То: | <u>4/30/2007</u> | |
| | | | DATE | | | AMOUNT | |
| To Whom Paid COM. TO ELECT MAYOR ALEXANDER | | | МО | DAY | YEAR | | |
| Mailing Address MUNICIP. BLDG. | | | 3 | 27 | 2007 | \$ | 100.00 |
| City NEW CASTLE | State | Zip Code (Plus 4) | Description of Expenditure | | | | |

PAGE TOTAL Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. \$ 100.00

16101

PΑ

Description of Expenditure

DONATION

NEW CASTLE