

# Campaign Finance Report

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

Filer Identification Number : 8000661		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: LAWRENCE CO REP COM											
Street Address: 1105 DEWEY AVE											
City: NEW CASTLE					State: PA		Zip Code: 16101-6817				
TYPE OF REPORT  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No <input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6. X	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2000	FILING METHOD ( ) CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE			
Name of Office Sought by Candidate:					DATE OF ELECTION			District Number	Office Code	Party Code	County Code
					MO	DAY	YEAR				
					11	7	2000	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		1	1	1		11	27	2000			
A. Amount Brought Forward From Last Report					\$ 11,839.87						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 6,775.00						
C. Total Funds Available (Sum Of Lines A and B)					\$ 18,614.87						
D. Total Expenditures (From Schedule III)					\$ 6,147.12						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 12,467.75						
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)					\$ 0.00						

## AFFIDAVIT SECTION

**PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.**

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**Part II- If this is a report of a candidate's authorized Committee, Candidate 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.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
Detailed Summary Page

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
LAWRENCE CO REP COM	<b>From:</b> <b>To:</b> <u>11/27/2000</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 6,775.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 0.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 0.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 0.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)</b>	\$ 6,775.00
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<div>PART A</div> <div>CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES</div> <div>\$50.01 TO \$250.00</div> <div>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.</div>	
Name of Filing Committee or Candidate	Reporting Period
	From: To:
DATEAMOUNT	

Full Name of Contributing Committee			MO	DAY	YEAR	\$0.00
Mailing Address						
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 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
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Full Name of Contributor			MO	DAY	YEAR	\$0.00
Mailing Address						
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 Candidate	Reporting Period	
	From:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					

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

<b>PAGE TOTAL</b>
\$ 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: <span style="float: right;">To:</span>

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		

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

<b>PAGE TOTAL</b>
\$ 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	Reporting Period  From: <span style="float: right;">To:</span>
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			DATE			AMOUNT
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
LAWRENCE CO REP COM		<b>From:</b>	<b>To:</b> <u>11/27/2000</u>
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period		(3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 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: <span style="float: right;">To:</span>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						<b>PAGE TOTAL</b>  \$ 0.00



# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
LAWRENCE CO REP COM	From To: <u>11/27/2000</u>

DATE				AMOUNT
<b>To Whom Paid</b> NEST EGG	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 139 SO MARKET ST	10	28	2000	\$ 125.00
<b>City</b> NEW WILMINGTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16142	<b>Description of Expenditure</b> GIFT FOR SPEAKER	
<b>To Whom Paid</b> T & R PRODUCTS	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 309 W GRANT ST	10	28	2000	\$ 79.50
<b>City</b> NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16101	<b>Description of Expenditure</b> PLAQUE FOR REP OF YEAR	
<b>To Whom Paid</b> BUSH 2000 SPALDING	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> CRANBERRY TWP	10	25	2000	\$ 206.45
<b>City</b> PITTSBURGH	<b>State</b> PA	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> YARD SIGNS	
<b>To Whom Paid</b> JENNIFER NICHOLSON	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 509 E LEASURE AVE	10	25	2000	\$ 300.00
<b>City</b> NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16101	<b>Description of Expenditure</b> CAMPAIGN ADS	
<b>To Whom Paid</b> NORMAN DE GIDIO	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 13 E EDISON AVE	10	24	2000	\$ 300.00
<b>City</b> NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16101	<b>Description of Expenditure</b> RESERV FOR FALL DINNER DOWNPMT	

To Whom Paid SUPERIOR SIGNS & GRAPHICS			MO	DAY	YEAR	\$ 53.00
Mailing Address 914 S MILL ST			10	24	2000	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101	Description of Expenditure SPEAKER SIGN			

To Whom Paid CRANE ROOM GRILLE			MO	DAY	YEAR	\$ 3,100.00
Mailing Address 3009 WILMINGTON RD			10	24	2000	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101	Description of Expenditure FALL DINNER			

To Whom Paid RAY MELCER			MO	DAY	YEAR	\$ 85.00
Mailing Address 3027 PINCHOT			10	24	2000	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101	Description of Expenditure MUSIC FOR DINNER			

To Whom Paid BORO OF ELLWOOD CITY			MO	DAY	YEAR	\$ 21.38
Mailing Address 525 LAWR AVE			10	25	2000	
City ELLWOOD CITY	State PA	Zip Code (Plus 4) 16117	Description of Expenditure ELEC BILL FOR HDQ			

To Whom Paid NORMAN DE GIDIO			MO	DAY	YEAR	\$ 598.06
Mailing Address 13 E EDISON AVE			10	31	2000	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101	Description of Expenditure OCT EXPENSES			

To Whom Paid THE NEW ENGLANDER			MO	DAY	YEAR	\$ 724.09
Mailing Address 3009 WILMINGTON RD			11	1	2000	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101	Description of Expenditure FALL DINNER			

<b>To Whom Paid</b> NICK RSKO			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 120 MARTIN AVE			10	31	2000	
<b>City</b> ELLWOOD CITY	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16117	<b>Description of Expenditure</b> EXP FOR OCT			

<b>To Whom Paid</b> JOYCES RESTAURANT			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> FIFTH ST			11	3	2000	
<b>City</b> ELLWOOD CITY	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16117	<b>Description of Expenditure</b> RALLY BKFST			

<b>To Whom Paid</b> ANTHONY DE CARLO			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 2418 WILMINGTON RD			11	4	2000	
<b>City</b> NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16105	<b>Description of Expenditure</b> POLITICAL SIGNS			

<b>To Whom Paid</b> QUICK PRINT			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 701 WILMINGTON RD			11	3	2000	
<b>City</b> NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16101	<b>Description of Expenditure</b> SAMPLE BALLOTS			

<b>To Whom Paid</b> GERALD COLE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 500 LAWR AVE			11	7	2000	
<b>City</b> ELLWOOD CITY	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16117	<b>Description of Expenditure</b> HDQ RENT			

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 6,147.12

