### **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	90002	297				port		CANDI	ANDIDATE COMMITTEE \( \square\) LOBBYIST								
Name of Filing C	Committee, C	andida	te or Lo	obbyist:		PSP.	A Po	liical	Support	for Pol	itical	Action						_
Street Address:	600 THI	RD AV	E															
City:	KINGSTO	ON							State:	PA			Zip Cod	le: 18	3704-5	815		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1.	2ND FRIDAY PRIMARY	Y PRE	-	2. <b>X</b>	30 DA PRIMA		POST-	3.		AMENDM REPORT?	No	•	1		
(place X to the right of	6TH TUESDAY PRE-ELECTIO		4.	2ND FRIDA' ELECTION	y pre	≣-	5.	30 DA ELECT		POST-	6.		TERMINATION Yes REPORT?		Yes	No	•	/
report type)	ANNUAL REI	PORT	7.	<b>Year</b> 2008					IG METHO				PAPER		/	DISKE	TTE	
Name of Office S	- Sought by Ca	ndidate	e:			_			DATE O	F ELE	CTIO	N	District Number	ty Code	Count			
									мо	DAY	YE	AR						
									11		4	2008		(SEE IN	STRUCTI	ONS FOR O	ODES)	
Summary of Expenditures		nd	МО	DAY	YEAR	1		_	МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
				1 1	2	800	Т	<u> </u>	4		7	2008						
A. Amount Bro	ught Forward	d From	Last Re	eport				\$			6,4	51.23						
B. Total Monet	ary Contribut	tions A	nd Rece	eipts (From	Sche	dule	1)	\$				0.00						
C. Total Funds	Available (Su	um Of	Lines A	and B)				\$			6,4	51.23						
D. Total Expen	ditures (Fron	m Sche	dule III	I)				\$			1,0	00.00						
E. Ending Cash	Balance (Su	btract	Line D	From Line (	C)			\$			5,4	51.23						
F. Value Of In-	Kind Contrib	utions	Receive	ed (From So	chedu	le II	:)	\$				0.00						
G. Unpaid Debt	s And Obliga	ations (	(From S	chedule IV	)			\$				0.00			1			
					AFF	IDA	\VI	T SE	CTION									
PART I - If this is		-		_						-		_						
I swear (or affirm) correct and comple		ort, inclu	iding the	attached sch	nedule	s file	d on	paper o	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , tru	ie,
Sworn to and subs	cribed before r day of	me this		20							S	ignature	of Perso	n Submit	ting Rep	ort		-
		·						- -					Prin	ted Name	e			-
My Commission Ex		Signatur	-										Emai	il				-
	мо		DA	λΥ	YR			_		Are	ea Cod	e	Daytim	e Teleph	none Nu	mber		-
Part II- If this is	a report of a	a candi	idate's a	authorized	Comn	nitte	e, C	andida	ate shall	sign he	ere.							Ī
I swear (or affirm) No 320) as amende		est of m	y knowle	edge 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	,
Sworn to and subsc	ribed before m	ne this										Si	ignature o	of Candid	ate			-
	day of 							_					Duint-	d Name				_
	Sign	ature						-					Printe	d Name				
My Commission Exp	_	acui e											Ema	il				<sup>-</sup>
	M	10	DA	ΑΥ	YR	1		•		Area	Code		Da	aytime T	elephon	e Numb	er	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	Period		
PSPA Poliical Support for Political Action	From:	1/1/200	<u>8</u> To:	4/7/2008
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	) 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 Pa			\$	0.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

Name of Filing Committe	e or Candidate		Re	porting	Period			
			Fr	om:		То	:	
			1		DATE			AMOUNT
Full Name of Contributing	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.

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 of Candidate					Reporting Period From: To:					
					DATE		ı	AMOUNT		
Full Name of Contributor				МО	DAY	YEAR				
Mailing Address							\$	0	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 Candidate			Reporting	Period				
			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 Scho	edule I, Detailed Sun	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			Reporting Period						
		Fron	n:		То	То:			
			D/	<b>ATE</b>		АМО	UNT		
			МО	DAY	YEAR				
						\$	0.00		
State	Zip Code (Plus	s <b>4</b> )							
			Occupat	ion					
e of	City			State		Zip Code (	Plus 4)		
lule I, Detailed Su	ımmary Page,	Section	on 3.		4		<b>E TOTAL</b> 0.00		
	e of	e of City	State Zip Code (Plus 4)	State Zip Code (Plus 4) Occupat	State Zip Code (Plus 4)  Occupation  Octobring State	State Zip Code (Plus 4)  Occupation  Occupation  Olivy State  State  Output  Date  Occupation  Output  Output	DATE AMO  MO DAY YEAR  \$ State Zip Code (Plus 4)  Occupation  Occupation  PAG		

## 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	ting Perio	od			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•		•	•			
Enter Grand Total of Part E o	on Schedule I. Detailer	d Summary Page	Section	4			PA	GE TOTAL
	,,,	. Junimary 1 ago,	5000.011				\$	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		
PSPA Poliical Support for Political Action	From:	<u>1/1/2008</u> <b>To:</b>	<u>4/7/2008</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, 1		\$	0.00

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Candid	ate		Reportin	g Period			
	Fr						
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	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 Sun	nmary 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 Candidat	e				Re	porting P	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor	•		•			Occupa	tion			
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				<b>PAGE TOTAL</b> 0.00

### STATEMENT OF EXPENDITURES

Name of Filing Committee or	Candidate		Reporti	ng Period			
PSPA Poliical Support for Poli	tical Action		From	<u>1/:</u>	4/7/2008		
				DATE			AMOUNT
<b>To Whom Paid</b> Phyllis Mundy for State Repre	мо	DAY	YEAR				
Mailing Address 157 N Gates Avenue				27	2008	\$	500.00
<b>City</b> Kingston	State PA	<b>Zip Code (Plus 4)</b> 18704	<b>Descri</b> Contrib	ption of Exp	penditure		
<b>To Whom Paid</b> Committee to Elect Jack Wagi	ner		МО	DAY	YEAR		
Mailing Address C/O 22 Ea	st Union Street		3	27	2008	\$	500.00
City Wilkes-Barre State PA Zip Code (Plus 4) 18702			<b>Descri</b> Contrib	ption of Exp oution	penditure		
	<b>,</b>	<b>,</b>	<b>-</b>				PAGE TOTAL

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

1,000.00