Campaign Finance Report

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

Filer Identification8000661ReportNumber :Filed B						CANDI	DATE	СО	MMITTEE	 ✓ 	LOBE	BYIST		
	Committee, Cand	idate or L	obbyist:			-	L COREPCO	 DM						
Street Address:														
City:	NEW CASTL	E					State:	PA		Zip Co	de: 16	101-6	817	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2. X	30 D/ PRIM		POST-	3.	AMEND REPORT		Yes	No	 ✓
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA				AY F TION	POST-	6.	TERMIN REPORT		Yes	No	\checkmark
report type)	ANNUAL REPOR	T 7.	Year 2008				ING METHOD) CHECK ONE			PAPER		\checkmark	DISKE	TTE
Name of Office	L Sought by Candid	late:					DATE O	F ELEC	CTION	District Numbe		Par	ty Code	County Code
							мо	DAY	YEAR			REP		37
							11		4 20	08	(SEE INS	STRUCTIO	ONS FOR	CODES)
Summary of Expenditures	Receipts and	мо	DAY	YEAR		_	мо	DAY	YEAR	F	OR OFFIC	E USE	ONLY	
			1 1	. 20	008 T	0	4		7 20	08				
	ought Forward Fre		-			\$			1,709.3					
B. Total Monet	ary Contribution:	s And Red	eipts (Fron	n Schee	dule I)	\$			25.0	00				
C. Total Funds	Available (Sum (Of Lines A	and B)			\$			1,734.3	15				
D. Total Expen	ditures (From Sc	hedule II	II)			\$			442.3	9				
	n Balance (Subtra			-		\$			1,291.7					
	Kind Contributio		•		le II)	\$			0.0					
G. Unpaid Deb	ts And Obligatior	is (From a	Schedule IV	-		\$			0.0					
							CTION							
	s a Committee re) that this report, ir	• •	-					• •		-		vledge	and beli	ef , true
-	scribed before me tl day of	nis							Signat	ure of Pers	on Submitt	ing Rep	oort	
						-				Pri	nted Name			
My Commission E	Signa xpires	ture								Ema	ail			
-	мо	D	AY	YR		-		Are	a Code		ne Teleph	one Nu	mber	
Part II- If this is	a report of a ca	ndidate's	authorized	Comm	nittee, C	andid	ate shall	sign he	re.					
I swear (or affirm No 320) as amend) that to the best of ed.	f my knowl	edge and bel	ief this	political	comm	ittee has n	ot violat	ed any pro	visions of tl	ne act of Ju	ine 3,1	937 (P.L	1333,
Sworn to and subs	cribed before me thi day of	is	20							Signature	of Candida	ite		
						-				Print	ed Name			
My Commission Ex	Signature	e				-				Em	ail			
	мо	D	AY	YR				Area (Code		Daytime Te	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** LAWRENCE CO REP COM From: <u>1/1/2008</u> **To:** 4/7/2008 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 25.00 \$ **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)** 0.00 All Other Contributions (Part B) \$ **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 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 \$ 25.00 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 Candidat	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			
inter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.							\$	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		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address	_	_					\$	0.00		
City	State	Zip Code (Plus 4)							
								PAGE TOTAL		
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.								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		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 Schedule I, Detailed Summary Page, Section 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				Reporting Period					
From:				n: To:					
				DATE AMOUNT				IOUNT	
Full Name of Contributor				мо	DAY	YEAR	\$	0.00	
Mailing Address									
City	State	Zip Code (Pl	ıs 4)						
Employer Name				Occupation					
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)	
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 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	Name of Filing Committee or Candidate			Reporting Period						
				n: To:						
				D	ATE			AMOUNT		
Full Name				мо	DAY	YEAR	\$		0.00	
Mailing Address										
City	State	Zip Code (Plus 4)							
Receipt Description							•			
							PAGE TO	TAL		
Enter Grand Total of Part E on Schedule I, Detailed Summary 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>1/1/2008</u> то:	<u>4/7/2008</u>								
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER 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			Reporting	Reporting Period					
				From:					
				DATE			AMOUNT		
Full Name of Contributor				DAY	YEAR				
Mailing Address						7 \$	0.0		
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.						PAGE TOTAL			
						\$	0.0		

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

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Reporting Period						
				From:							
				DATE			AMOUNT				
Full Name of Contributor				мо	DAY	YEAR					
Mailing Address							\$ 0.00				
City	State	Zip Code(Plus 4)									
Employer of Contributor		•		Occupation							
Employer Mailing Address/Principal Plac	e of Business (City	State	e Zip	Code(Plus 4)	Descri	ption of Contribution				
Enter Grand Total of Part G on Scho Summary Page, Section 3.	edule II, In-Kind	d Contributions D	etaile	ed			PAGE TOTAL 0.00				

SCHEDULE III STATEMENT OF EXPENDITURES

Name	lame of Filing Committee or Candidate			Reporting Period					
LAWRE	ENCE CO REP COM			From	<u>1/:</u>	<u>1/2008</u>	То:	<u>4/7/2008</u>	
					DATE			AMOUNT	
To Who	m Paid			мо	DAY	YEAR			
REPUBL	ICAN STATE COMMITTEE								
Mailing Address				3	5	2008	\$	200.00	
City	HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
PA 17120				CONTRI	BUTION				
To Whom Paid				мо	DAY	YEAR			
PEOPLE WITH HART									
Mailing Address			3	5	2008	\$	50.00		
City NEW CASTLE State Zip Code (Plus 4)				Descrip	tion of Exp	enditure			
		PA	16105	CONTRI	BUTION				
To Who	m Paid			мо	DAY	YEAR			
NICK R	ISKO			no	2	12/11			
Mailing	Address			3	25	2008	\$	57.39	
City	ELLWOOD CITY	State	Zip Code (Plus 4)	Description of Expenditure					
		PA	16117	OFFICE	EXP. FOR	JAN. FEB	. & MARC	Н	
To Who	m Paid			мо	DAY	YEAR			
NORTH	WEST CAUCUS			no	2	12/11			
Mailing	Address			3	25	2008	\$	135.00	
City	TITUSVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	1		
		PA	16354	2008 DI	JES				
								PAGE TOTAL	
Enter (Grand Total of Expenditures o	on Page 1, Report C	over Page, Item D).			\$	442.39	

9/15/2025 4:23:37 AM