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	80450)				port ed B		CANE	DIDATE	~	CO	MMITTEE		LOBE	BYIST		
Name of Filing C	ommittee	, Candida	ate or Lo	obbyist:			ne Ya	<u> </u>			_							
Street Address:																		
City:									State:				Zip Code	e:				
TYPE OF REPORT	6TH TUES PRE-PRIM		1.	2ND FRIDA' PRIMARY	Y PRE	-	2.	30 DA		POST-	3. 2	х	AMENDME REPORT?	NT	Yes	No		/
(place X to the right of	6TH TUES PRE-ELECT		4.	2ND FRIDA' ELECTION	Y PRE	≣-	5.	30 DA		POST-	6.		TERMINAT REPORT?	TION	Yes	No		/
report type)	ANNUAL	REPORT	7.	Year 2008					IG METI CHECK				PAPER		\checkmark	DISKE	TTE	
Name of Office S	ought by	Candidat							DATE	OF ELE	CTI	ION	District Number	Office Code	Par	ty Code	Coun	
									МО	DAY	,	YEAR	23	STS	REP		41	
SENATOR IN TH	HE GENER	RAL ASSE	MBLY						1	1	4	2008		(SEE INS	TRUCTIO	ONS FOR	CODES)
Summary of		and	МО	DAY	YEAR	Ł			мо	DAY	,	YEAR	FOR	OFFIC	E USE	ONLY		
Expenditures	from:			1 1	2	800	Т	0		5	12	2008						
A. Amount Bro	ught Forw	ard From	ı Last R	eport				\$	-	(100,	,501.58)						
B. Total Moneta	ary Contri	butions A	Ind Rec	eipts (From	Sche	dule	e I)	\$				0.00						
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$		(100,	,501.58)						
D. Total Expend	ditures (F	rom Sche	dule II	I)				\$			118	3,807.03						
E. Ending Cash	Balance (Subtract	Line D	From Line (C)			\$		(2	219,	308.61)	-					
F. Value Of In-	Kind Cont	ributions	Receive	ed (From Se	chedu	le II	I)	\$				0.00						
G. Unpaid Debt	s And Obl	igations	(From S	chedule IV)			\$				0.00						
					AFF	IDA	AVI	T SE	CTION	١								
PART I - If this is		-	-	_								_						
I swear (or affirm) correct and comple		eport, inclu	uding the	: attached scl	nedules	s file	d on	paper	or by ele	ctronic n	nediu	ım, are to t	the best of	my know	/ledge	and beli	ef , tr	ue
Sworn to and subs	cribed befo day of	re me this		20								Signature	e of Person	Submitt	ing Rep	ort		
		Signatur	·e					_					Printe	ed Name				
My Commission Ex	opires -							_					Email					
		мо	DA	4Y	YR					A	rea C	ode	Daytime	Telepho	one Nu	mber		ᆜ
Part II- If this is	a report	of a cand	idate's	authorized	Comn	nitte	ee, C	andid	ate sha	ll sign f	ere.	•						
I swear (or affirm) No 320) as amende		e best of m	y knowle	edge and beli	ef this	poli	tical	comm	ittee has	not viol	ated a	any provis	ions of the	act of Ju	ne 3,19	937 (P.L	1333	3,
Sworn to and subsc		e me this										s	ignature of	Candida	te			-
-	day of —							_					Printed	Name				-
	s	ignature						-										_
My Commission Exp	ires												Email					
	_	МО	D/	AY	YR	l l		-		Area	Cod	le	Day	time Te	lephon	e Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	of Filing Committee or Candidate Reporting Period								
Gene Yaw	From:	1/1/200	<u>8</u> To:	5/12/2008					
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor									
TOTAL for the Reporting	g 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	y 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	y Period	(3)	\$	0.00					
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)									
TOTAL for the Reporting	g Period	(4)	\$	0.00					
Total Monetary Contributions and Receipts During this Reporting Period (Add ar 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

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	е	R	eporting	Period			
		F	rom:		То	:	
				DATE			AMOUNT
Full Name of Contributing Committee			мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

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.

		F	rom:		To	o:	
				DATE			AMOUNT
Full Name of Contributor			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.

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 Cai	ndidate		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Comm	nittee			мо	DAY	YEAR		0.00
Mailing Address							- \$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C o	on Schedule I, Detaile	d Summary 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			Rep	orting Pe	eriod			
			Fror	n:		To) :	
				D	ATE		А	MOUNT
Full Name of Contributor				МО	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	s 4)					
Employer Name		I		Occupa	tion	•		
Employer Mailing Address/Principal Place	e of Business	City		•	State		Zip Cod	le (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Si	ummary Page	, Sectio	on 3.			P	AGE 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 of	or Candidate		Report	ing Peri	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							\neg	
City	State	Zip Code (I	Plus 4)					
Receipt Description	•	•			1	•	•	
Futor Coand Total of Bank	Cabadula I Detailed	Commence De	Cookie					PAGE TOTAL
Enter Grand Total of Part I	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 Perio	od	
Gene Yaw	From:	<u>1/1/2008</u> To:	<u>5/12/2008</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
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,	<u> </u>	\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Car	ndidate		Reportin	g Period				
			From:			To	:	
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$	C	0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•		•		
					-			
Enter Grand Total of Part F o	n Schedule II, In-Ki	nd Contributions Detai	led Sum	mary Pa	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				Rep	porting	Period			
				Fro	m:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address				-				\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occup	ation			
Employer Mailing Address/Principal Plac	e of Business	City	у	State	e Zip	Code(Plus 4)	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, In-Kin	nd C	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or C	Reporti	ng Period					
Gene Yaw	From	1/	1/2008	То:	5/12/2008		
				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
Friends of Gene Yaw for Senat	:e		140		I LAIN		
Mailing Address			5	12	2008	\$	118,807.03
City Williamsport	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA		loan to	campaign			
							PAGE TOTAL
Enter Grand Total of Expen	ditures on Page 1, Re	port Cover Page, Item D).			s	118 807 03