# **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 200	)1154			Report Filed B		CANDI	DATE		СОМІ	MITTEE	✓	LOBI	BYIST	
Name of Filing C	Committee, Candi	idate or Lo	obbyist:		GREATE	r joi	HNSTOW	N REG	IONA	L PAC	INC				
Street Address:	111 MARKE	T ST													
City:	JOHNSTOW	N					State:	PA			Zip Coo	<b>le:</b> 15	901		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2. <b>X</b>	30 DA PRIM		POST-	3.		AMENDM REPORT		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	AY PRE	5.	30 DA		POST- 6.		6. TERMINATI REPORT?		RMINATION Yes PORT?		No	~
report type)	ANNUAL REPOR	<b>T</b> 7.	<b>Year</b> 2009			FILING METHOD ( ) CHECK ONE				PAPER		$\checkmark$	DISKE	TTE	
Name of Office S	bought by Candid	ate:	•				DATE O	FELE	стіо	N	District Number	Office Code	Par	ty Code	County Code
							мо	DAY	YE	AR					
							11		3	2009		(SEE INS	TRUCTI	ONS FOR (	CODES)
	Receipts and	мо	DAY	YEAR	Ł		мо	DAY	YE	AR	FO	R OFFIC	E USE	ONLY	
Expenditures from:         1         1         2009         1					009 <b>T</b>	0	5		4	2009					
A. Amount Brought Forward From Last Report						\$			21,7	13.90					
B. Total Monet	B. Total Monetary Contributions And Receipts (From Schedule I					\$			1,5	33.53					
C. Total Funds	Available (Sum (	Of Lines A	and B)			\$			23,2	47.43					
D. Total Expen	ditures (From Sc	hedule II	I)			\$			8,9	78.00					
E. Ending Cash	Balance (Subtra	ct Line D	From Line	C)		\$			14,2	69.43					
F. Value Of In-	Kind Contributio	ns Receiv	ed (From S	chedu	le II)	\$				0.00	-				
G. Unpaid Deb	s And Obligation	is (From S	Schedule I	/)		\$				0.00					
				AFF	IDAVI	T SE	CTION								
PART I - If this is		• •	-					• •		-	-				
I swear (or affirm correct and compl	) that this report, in ete.	cluding the	e attached so	hedules	s filed on	paper	or by elect	ronic m	edium,	, are to f	the best o	f my knov	vledge	and beli	ef , true
Sworn to and subs	cribed before me th day of	nis	20						s	ignature	e of Perso	n Submitt	ing Rep	oort	
	Signat	ture				-					Prin	ted Name			
My Commission E	cpires					_					Ema	il			
	МО	D/	AY	YR				Are	ea Cod	e	Daytim	e Teleph	one Nu	mber	
Part II- If this is	a report of a ca	ndidate's	authorized	Comn	nittee, C	andid	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amendo	that to the best of ed.	<sup>t</sup> my knowle	edge and bel	ief this	political	comm	ittee has n	ot viola	ted an	y provis	ions of th	e act of Ju	ine 3,1	937 (P.L	. 1333,
Sworn to and subso		S								s	ignature o	of Candida	ite		
	day of					-					Printe	d Name			
Signature						-									
My Commission Expires											Ema	il			
	мо	D/	<b>AY</b>	YR		-		Area	Code		Da	aytime Te	elephon	e Numb	er

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Detailed Summary Page									
Name of Filing Committee or Candidate	Reporting	g Period							
GREATER JOHNSTOWN REGIONAL PAC INC	From:	<u>1/1/200</u>	9 To:	<u>5/4/2009</u>					
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)			\$	1,500.00					
TOTAL for the Reporting	Period	(3)	\$	1,500.00					
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)									
TOTAL for the Reporting	Period	(4)	\$	33.53					
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			\$	1,533.53					

# 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	te		Reporting Period					
			Fro	From: To:			:	
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
							Γ	PAGE TOTAL

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

\$

0.00

Use this Part to ite \$5	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 Candidat	e		Rep	orting P	eriod					
Fr				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 S	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 Cand	ame of Filing Committee or Candidate		Reporting Period					
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Commit	ttee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on	Schedule I, Detail	ed Summary Pa	age, Sectio	n 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 Co	mmittee or Candidate				Rep	orting Per	riod			
GREATER JOHNS	TOWN REGIONAL PAC	INC			From	n:	<u>1/1/2</u>	<u>009</u> To	):	<u>5/4/2009</u>
						DA	TE		АМ	OUNT
Full Name of Cont JOEL VALENTINE	ributor					мо	DAY	YEAR		
Mailing Address	842 VICKROY AVENUE	1							\$	500.00
City JOHNSTO	WN	State	Zip	p Code (Plus	; 4)	4	15	2009		
		PA	15	901						
Employer Name	WESSEL & COMPANY				Occupat	ion M	1ANAGE	R		
Employer Mailing / Business	Address/Principal Place	e of		City			State		Zip Code	(Plus 4)
215 MAIN STREET JOHNSTOWN			OWN		PA		15901			
Full Name of Contributor KAREN VARGA				мо	DAY	YEAR				
Mailing Address	215 MAIN STREET								\$	500.00
City JOHNSTO	WN	State	Zip	p Code (Plus	; 4)	4	15	2009		
		PA	15	901						
Employer Name	WESSEL & COMPANY	· · · · · · · · · · · · · · · · · · ·				Occupation SHAREHOLDER				
Employer Mailing / Business	Address/Principal Place	e of		City			State		Zip Code	(Plus 4)
215 MAIN STREE	г			JOHNSTO	OWN		PA		15901	
Full Name of Cont DONATO ZUCCO	ributor					мо	DAY	YEAR		
Mailing Address	2201 WOODCREST DF	RIVE							\$	500.00
City JOHNSTO	WN	State	Zip	p Code (Plus	; 4)	4	15	2009		
		РА	15	905						
Employer Name CROWN AMERICAN ENTERPRISES			Occupat	ion V	/P & CH	IEF ADMII	NISTRATIVE			
Employer Mailing Address/Principal Place of City Business				State			Zip Code (Plus 4)			
PASQUERILLA PL/	4ZA			JOHNSTO	OWN		PA		15907	

\$

### 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 Candida	ame of Filing Committee or Candidate Re				Reporting Period					
GREATER JOHNSTOWN REGIONAL P	AC INC		From:		<u>1/1/200</u>	<u>19</u> To:	: <u>5/4/2009</u>			
				D	ATE			AMOUNT		
Full Name AMERISERV FINANCIAL				мо	DAY	YEAR				
Mailing Address 216 FRANKLIN S	TREET						\$	11.88		
City JOHNSTOWN	<b>State</b> PA	<b>Zip Code (</b> 15907	Plus 4)	1	31	2009				
Receipt Description INTEREST INCOME										
Full Name AMERISERV FINANCIAL				мо	DAY	YEAR				
Mailing Address 216 FRANKLIN S	TREET						\$	10.37		
City JOHNSTOWN	State PA	<b>Zip Code (</b> 15907	Plus 4)	2	28	2009				
Receipt Description INTEREST II	NCOME			•	•	1				
Full Name AMERISERV FINANCIAL				мо	DAY	YEAR				
Mailing Address 216 FRANKLIN S	TREET						\$	11.28		
City JOHNSTOWN	State PA	Zip Code ( 15907	Plus 4)	3	31	2009				
Receipt Description INTEREST INCOME										
Enter Grand Total of Part E on Sche	dule I. Detailed Sum	mary Page	Section	4		[		PAGE TOTAL		
	une 1, Delaneu Sun	iiiiai y Faye,	Jection	4.			\$	33.53		

### 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	<b>Reporting Period</b>		
GREATER JOHNSTOWN REGIONAL PAC INC	From:	<u>1/1/2009</u> <b>To:</b>	<u>5/4/2009</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	「 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	g Period			
			From:			То:	
				DATE		АМО	UNT
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 Schedule II, In-Kind Contributions Detailed Summary Pag Section 2.					je,	PAGE	TOTAL
					4	6	0.00

### PAGE 11

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

Name of Filing Committee or Candidate					Re	porting F	Period			
					From: To:					
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor			•		Occupation					
Employer Mailing Address/Principal Place of City Stat Business			State		Zip 4)	Code(Plus	Descri	ption	of Contribution	
Enter Grand Total of Part G on Sch	Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed							PAGE TOTAL		
Summary Page, Section 3.							0.00			

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period				
GREATER JOHNSTOWN REGIONAL PAC	CINC		From	<u>1/</u>	1/2009	То:	<u>5/4/2009</u>	
				DATE			AMOUNT	
To Whom Paid AMERISERV FINANCIAL			мо	DAY	YEAR			
Mailing Address 216 FRANKLIN STR	ET		3	9	2009	\$	58.00	
City JOHNSTOWN	State PA	<b>Zip Code (Plus 4)</b> 15907		Description of Expenditure 2008 1120-POL TAX				
To Whom Paid AMERISERV FINANCIAL			мо	DAY	YEAR			
Mailing Address 216 FRANKLIN STREET						\$	15.00	
City     JOHNSTOWN     State     Zip Code (Plus 4)       PA     15907				Description of Expenditure MONTHLY BANK FEES				
To Whom Paid COMMITTEE TO ELECT FRANK BURNS			мо	DAY	YEAR			
Mailing Address			3	4	2009	\$	1,000.00	
City	State	Zip Code (Plus 4)	Description of Expenditure CONTRIBUTION					
To Whom Paid RENDELL FOR GOVERNOR			мо	DAY	YEAR			
Mailing Address			4	15	2009	\$	5,000.00	
City	State	Zip Code (Plus 4)		<b>ition of Exp</b> IBUTION	penditure	9		
To Whom Paid THE PROVEN TEAM			мо	DAY	YEAR			
Mailing Address			4	15	2009	\$	1,500.00	
City	State Zip Code (Plus 4)			Description of Expenditure CONTRIBUTION				

To Whom Paid WESSEL & COMPANY	ESSEL & COMPANY			DAY	YEAR	
Mailing Address 215 MAIN STREET			4	7	2009	\$ 1,405.00
City     JOHNSTOWN     State     Zip Code (Plus 4)     Description of Expenditure       PA     15901     ACCOUNTING FEES						
Enter Grand Total of Expenditures o	\$ <b>PAGE TOTAL</b> 8,978.00					