

# Campaign Finance Report

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

<b>Filer Identification Number :</b> 2008210		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>	<b>LOBBYIST</b>	
<b>Name of Filing Committee, Candidate or Lobbyist:</b> BURNS, FRANK COM TO ELECT								
<b>Street Address:</b> 1654 WILLIAM PENN AVE								
<b>City:</b> JOHNSTOWN				<b>State:</b> PA		<b>Zip Code:</b> 15909		
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2009	<b>FILING METHOD ( ) CHECK ONE</b>		<b>PAPER</b> <input checked="" type="checkbox"/> <b>DISKETTE</b> <input type="checkbox"/>		
<b>Name of Office Sought by Candidate:</b>				<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>
JUDGE OF THE COURT OF COMMON PLEAS				MO DAY YEAR			CPJ	DEM
				11 3 2009			11	
							(SEE INSTRUCTIONS FOR CODES)	
<b>Summary of Receipts and Expenditures from:</b>		MO	DAY	YEAR	<b>TO</b>		<b>FOR OFFICE USE ONLY</b>	
		1	1	2009	5 4 2009			
<b>A. Amount Brought Forward From Last Report</b>				\$ 29,245.60				
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>				\$ 9,450.00				
<b>C. Total Funds Available (Sum Of Lines A and B)</b>				\$ 38,695.60				
<b>D. Total Expenditures (From Schedule III)</b>				\$ 4,216.13				
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>				\$ 34,479.47				
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>				\$ 0.00				
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>				\$ 3,200.00				

## 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>
BURNS, FRANK COM TO ELECT	From: <u>1/1/2009</u> To: <u>5/4/2009</u>

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

<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>	\$ 1,400.00
<b>All Other Contributions (Part B)</b>	\$ 8,000.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 9,400.00

<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>	\$ 9,450.00
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**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.**

<b>Name of Filing Committee or Candidate</b>				<b>Reporting Period</b>			
BURNS, FRANK COM TO ELECT				From: <u>1/1/2009</u> To: <u>5/4/2009</u>			
				<b>DATE</b>		<b>AMOUNT</b>	

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 200.00
CARPENTERS LEGISLATIVE PROGRAM OF PA			3	19	2009	
<b>Mailing Address</b>	650 RIDGE ROAD SUITE 200					
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>				
PITTSBURGH	PA	15205				

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 200.00
BIKE PAC			3	19	2009	
<b>Mailing Address</b>						
P.O. BOX 564						
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>				
MECHANICSBURG	PA	17055				

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 200.00
L.ROBERT KIMBALL & ASSOC. PAC			3	19	2009	
<b>Mailing Address</b>						
615 W. HIGHLAND AVE.						
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>				
EBENSBURG	PA	15931				

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 200.00
PLUMBERS & PIPEFITTERS LOCAL 354 PAC			3	19	2009	
<b>Mailing Address</b>						
PO DWR 1						
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>				
YOUNGWOOD	PA	15697				

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 200.00
FIRE PAC			3	19	2009	
<b>Mailing Address</b>						
PO BOX 463						
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>				
JOHNSTOWN	PA	15901				

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 200.00
PA ASSOC. OF NURSES ANESTHETISTS PAC			3	19	2009	
<b>Mailing Address</b>						
234 NORTH THIRD ST.						
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>				
HARRISBURG	PA	17101				

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 200.00
HAPAC-STATE			4	28	2009	
<b>Mailing Address</b>						
PO BOX 8600						
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>				
HARRISBURG	PA	17105				

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

**PAGE TOTAL**

\$ 1,400.00

# 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)**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
BURNS, FRANK COM TO ELECT	From: <u>1/1/2009</u> To: <u>5/4/2009</u>

				DATE		AMOUNT	
Full Name of Contributor M.E. PASQUERILLA				MO	DAY	YEAR	\$ 200.00
Mailing Address 945 MENOHER BLVD				3	19	2009	
City JOHNSTOWN	State PA	Zip Code (Plus 4) 15905					
Full Name of Contributor MARGARET A.O'MALLEY ATTY & LAW				MO	DAY	YEAR	\$ 200.00
Mailing Address 600 AMERI SERV FINANCIAL BLDG 216 FRANKLIN ST.				3	19	2009	
City JOHNSTOWN	State PA	Zip Code (Plus 4) 15901					
Full Name of Contributor STEPHEN J. MCANENY				MO	DAY	YEAR	\$ 200.00
Mailing Address 801 DREXEL AVE				3	19	2009	
City JOHNSTOWN	State PA	Zip Code (Plus 4) 15905					
Full Name of Contributor HEATH LONG				MO	DAY	YEAR	\$ 200.00
Mailing Address 522 SPRUCE ST.				3	19	2009	
City EBENSBURG	State PA	Zip Code (Plus 4) 15931					
Full Name of Contributor DANIEL R. THOMPSON				MO	DAY	YEAR	\$ 200.00
Mailing Address 2120 HILLHOLM ST.				3	19	2009	
City JOHNSTOWN	State PA	Zip Code (Plus 4) 15905					
Full Name of Contributor LENA C. KUCHERA				MO	DAY	YEAR	\$ 200.00
Mailing Address 1705 FRANKSTOWN RD.				3	19	2009	
City SUMMERHILL	State PA	Zip Code (Plus 4) 15958					

Full Name of Contributor JOHN L. LETIZIA			MO	DAY	YEAR	\$ 200.00
Mailing Address 156 FIRST AVE			3	19	2009	
City MINERAL POINT	State PA	Zip Code (Plus 4) 15942				
Full Name of Contributor MICHAEL A. BARLETTA			MO	DAY	YEAR	\$ 200.00
Mailing Address 307 DEVON DR.			3	19	2009	
City JOHNSTOWN	State PA	Zip Code (Plus 4) 15904				
Full Name of Contributor SARA ANN SARGENT			MO	DAY	YEAR	\$ 200.00
Mailing Address 200 WHISPERING PINE LANE			3	19	2009	
City JOHNSTOWN	State PA	Zip Code (Plus 4) 15905				
Full Name of Contributor ROBERT M. MCGOWAN, JR.			MO	DAY	YEAR	\$ 200.00
Mailing Address 245 TAIL TIMBER DR.			3	19	2009	
City JOHNSTOWN	State PA	Zip Code (Plus 4) 15904				
Full Name of Contributor JOHN J. LETIZIA			MO	DAY	YEAR	\$ 200.00
Mailing Address 140 GARNET ST.			3	19	2009	
City JOHNSTOWN	State PA	Zip Code (Plus 4) 15909				
Full Name of Contributor THOMAS M. KURTZ			MO	DAY	YEAR	\$ 250.00
Mailing Address 124 SEMINCLE ST.			3	19	2009	
City JOHNSTOWN	State PA	Zip Code (Plus 4) 15904				
Full Name of Contributor LOU CROCCO			MO	DAY	YEAR	\$ 125.00
Mailing Address 122 PALLISER ST.			3	19	2009	
City JOHNSTOWN	State PA	Zip Code (Plus 4) 15905				
Full Name of Contributor ROBYN CROCCO			MO	DAY	YEAR	\$ 125.00
Mailing Address 122 PALLISIR ST.			3	19	2009	
City JOHNSTOWN	State PA	Zip Code (Plus 4) 15905				
Full Name of Contributor RICHARD BOSSERMAN			MO	DAY	YEAR	\$ 100.00
Mailing Address 2119 HILLHOLM ST.			3	19	2009	
City JOHNSTOWN	State PA	Zip Code (Plus 4) 15905				

Full Name of Contributor			MO	DAY	YEAR	\$ 100.00
MICHALE KANE			3	19	2009	
Mailing Address	631 DIAMOND BLVD					
City	JOHNSTOWN	State	PA	Zip Code (Plus 4)	15905	
Full Name of Contributor			MO	DAY	YEAR	\$ 200.00
JOHN J. BUCHAN			3	19	2009	
Mailing Address	2000 BATES DR.					
City	JOHNSTOWN	State	PA	Zip Code (Plus 4)	15905	
Full Name of Contributor			MO	DAY	YEAR	\$ 200.00
MICHAEL S. KNAPP			3	19	2009	
Mailing Address	258 SCHOOL RD.					
City	HOOVERSVILLE	State	PA	Zip Code (Plus 4)	15936	
Full Name of Contributor			MO	DAY	YEAR	\$ 2,500.00
PSEA			2	10	2009	
Mailing Address	400 N. THIRD ST. P.O. BOX 1724					
City	HARRISBURG	State	PA	Zip Code (Plus 4)	17105-172	
Full Name of Contributor			MO	DAY	YEAR	\$ 400.00
WESTERN PA LABORERS POLITICAL ACTION FUND			3	19	2009	
Mailing Address	1425 FORBES AVE					
City	PITTSBURGH	State	PA	Zip Code (Plus 4)	15219	
Full Name of Contributor			MO	DAY	YEAR	\$ 400.00
MURTHA FOR CONGRESS COMMITTEE			3	19	2009	
Mailing Address	551 MAIN ST.,SUITE 120					
City	JOHNSTOWN	State	PA	Zip Code (Plus 4)	15901	
Full Name of Contributor			MO	DAY	YEAR	\$ 1,000.00
GREATER JOHNSTOWN REGIONAL PAC			3	19	2009	
Mailing Address	111 MARKET ST.					
City	JOHNSTOWN	State	PA	Zip Code (Plus 4)	15901	
Full Name of Contributor			MO	DAY	YEAR	\$ 400.00
UNITED MINE WORKERS OF AMERICA			3	30	2009	
Mailing Address	8315 LEE HIGHWAY 5TH FLOOR					
City	FAIRFAX	State	VA	Zip Code (Plus 4)	22031	

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

**PAGE TOTAL**

\$ 8,000.00

## 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
Mailing Address			YEAR	\$ 0.00
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>	
BURNS, FRANK COM TO ELECT		From: <u>1/1/2009</u> To: <u>5/4/2009</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 II**  
**PART G**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OVER \$250.00**

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

# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
BURNS, FRANK COM TO ELECT	From <u>1/1/2009</u> To: <u>5/4/2009</u>

				DATE	AMOUNT		
To Whom Paid MLAKER TRANSPORTATION, INC				MO	DAY	YEAR	\$ 2,150.00
Mailing Address 1976 VALLEY VIEW DRIVE				1	5	2009	
City DAVIDSVILLE	State PA	Zip Code (Plus 4) 15928	Description of Expenditure BUS TRIP ON 1-6-09 IN				
To Whom Paid JOHNSTOWN PA POSTAL STORE				MO	DAY	YEAR	\$ 12.14
Mailing Address FRANKLIN ST.				1	22	2009	
City JOHNSTOWN	State PA	Zip Code (Plus 4) 15901	Description of Expenditure POSTAGE				
To Whom Paid VALLEY PRINTING				MO	DAY	YEAR	\$ 189.74
Mailing Address 667 MAIN ST.				2	17	2009	
City JOHNSTOWN	State PA	Zip Code (Plus 4) 15901	Description of Expenditure INVITATIONS ENEVELOPES RSVP'S RSVP ENEVELOPES				
To Whom Paid HOLIDAY INN				MO	DAY	YEAR	\$ 578.47
Mailing Address 250 MARKET ST.				3	4	2009	
City JOHNSTOWN	State PA	Zip Code (Plus 4) 15901	Description of Expenditure CAMPAIGN BREAKFAST				
To Whom Paid COMMITTEE TO ELECT BARBARA J. KLINE				MO	DAY	YEAR	\$ 125.00
Mailing Address 200 S. CENTER ST				3	17	2009	
City EBENSBURG	State PA	Zip Code (Plus 4) 15931	Description of Expenditure DONATION				
To Whom Paid COMMITTEE TO ELECT PAT KINIRY				MO	DAY	YEAR	\$ 200.00
Mailing Address 1242 SCALP AVE. SUITE 2				3	19	2009	
City JOHNSTOWN	State PA	Zip Code (Plus 4) 15904	Description of Expenditure CONTRIBUTION				

To Whom Paid COMMITTEE TO ELECT TIM BURNS			MO	DAY	YEAR	\$ 200.00
Mailing Address 104 S. CENTER ST. STE. 315			3	20	2009	
City EBENSBURG	State PA	Zip Code (Plus 4) 15931	Description of Expenditure CONTRIBUTION			

To Whom Paid CAMBRIA COUNTY DEMOCRATIC PARTY			MO	DAY	YEAR	\$ 250.00
Mailing Address 104 S. CENTER ST.			3	20	2009	
City EBENSBURG	State PA	Zip Code (Plus 4) 15931	Description of Expenditure DONATION			

To Whom Paid POSTMASTER			MO	DAY	YEAR	\$ 210.00
Mailing Address 355 FIRST ST.			3	26	2009	
City CONEMAUGH	State PA	Zip Code (Plus 4) 15909	Description of Expenditure POSTAGE			

To Whom Paid POSTMASTER			MO	DAY	YEAR	\$ 84.00
Mailing Address 355 FIRST ST.			4	8	2009	
City CONEMAUGH	State PA	Zip Code (Plus 4) 15909	Description of Expenditure POSTAGE			

To Whom Paid SOMERSET COUNTY DEMOCRATIC COMMITTEE			MO	DAY	YEAR	\$ 60.00
Mailing Address P O BOX 11			4	8	2009	
City SOMERSET	State PA	Zip Code (Plus 4) 15501	Description of Expenditure CONTRIBUTION/DINNER			

To Whom Paid SOMERSET COUNTY DEMOCRATIC COMMITTEE			MO	DAY	YEAR	\$ 25.00
Mailing Address P.O. BOX 11			4	8	2009	
City SOMERSET	State PA	Zip Code (Plus 4) 15501	Description of Expenditure AD			

To Whom Paid CAMBRIA MAILING SERVICE INC.			MO	DAY	YEAR	\$ 65.00
Mailing Address 1265 FOREST HILLS DR. P.O. BOX 203			4	15	2009	
City SALIX	State	Zip Code (Plus 4) 15952	Description of Expenditure GOLF TOURNEY INVITATIONS			

To Whom Paid CAMBRIA MAILING SERVICE INC.			MO	DAY	YEAR	\$ 66.78
Mailing Address 1265 FOREST HILL DR. P.O. BOX 203			4	16	2009	
City SALIX	State PA	Zip Code (Plus 4) 15952	Description of Expenditure POSTAGE			

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

**PAGE TOTAL**

\$ 4,216.13



**SCHEDULE IV**

**STATEMENT OF UNPAID DEBTS**

**Use this Section to itemize all unpaid debts and obligations  
which are outstanding at the end of the reporting period**

<b>Name of Filing Committee or Candidate</b>  BURNS, FRANK COM TO ELECT	<b>Reporting Period</b>  <b>From:</b> <u>1/1/2009</u> <b>To:</b> <u>5/4/2009</u>
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				DATE			Outstanding Balance of Debt
Name of Creditor FRANK BURNS CANDIDATE				MO	DAY	YEAR	\$ 3,200.00
Mailing Address 1654 WM. PENN AVE.				4	16	2008	
City JOHNSTOWN		State PA	Zip Code (Plus 4) 15909		Description of Debt LOAN TO COMMITTEE		

<b>Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.</b>	<b>PAGE TOTAL</b>  \$ 3,200.00
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