

# Campaign Finance Report

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

Filer Identification Number : 7900271		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: DEM STATE SENATE CAMP COM											
Street Address: PO BOX 3792											
City: HARRISBURG				State: PA		Zip Code: 17105					
TYPE OF REPORT  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No <input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	Year 2009	FILING METHOD ( ) CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE			
Name of Office Sought by Candidate:					DATE OF ELECTION			District Number	Office Code	Party Code	County Code
					MO	DAY	YEAR	DEM			
					11	3	2009	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		1	1	2009		12	31	2009			
A. Amount Brought Forward From Last Report					\$ 100,752.52						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 17,170.28						
C. Total Funds Available (Sum Of Lines A and B)					\$ 117,922.80						
D. Total Expenditures (From Schedule III)					\$ 74,547.04						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 43,375.76						
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)					\$ 271,884.93						

## 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>
DEM STATE SENATE CAMP COM	From: <u>1/1/2009</u> To: <u>12/31/2009</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 210.00

<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>	\$ 500.00
<b>All Other Contributions (Part B)</b>	\$ 60.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 560.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 16,000.00
<b>All Other Contributions (Part D)</b>	\$ 400.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 16,400.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.28

<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>	\$ 17,170.28
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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>  DEM STATE SENATE CAMP COM	<b>Reporting Period</b>  From: <u>1/1/2009</u> To: <u>12/31/2009</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"><b>DATE</b></td> <td style="width: 50%; border: none;"><b>AMOUNT</b></td> </tr> </table>		<b>DATE</b>	<b>AMOUNT</b>
<b>DATE</b>	<b>AMOUNT</b>		

<b>Full Name of Contributing Committee</b> PENNSYLVANIA CEMETERY, CREMATION AND FUNERAL			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 125.00
<b>Mailing Address</b> 3051 GREEN POND ROAD			12	7	2009	
<b>City</b> EASTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18045				

<b>Full Name of Contributing Committee</b> PA DENTAL HYGIENISTS ASSOCIATION			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 125.00
<b>Mailing Address</b> PO BOX 606			12	7	2009	
<b>City</b> MECHANICSBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17055-060				

<b>Full Name of Contributing Committee</b> PA COMMUNITY PROVIDERS PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 125.00
<b>Mailing Address</b> 2101 N FRONT ST BUILDING 3, SUITE 200			12	7	2009	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17110-108				

<b>Full Name of Contributing Committee</b> PA COALITION OF NURSE PRACTITIONERS PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 125.00
<b>Mailing Address</b> PO BOX 428			12	7	2009	
<b>City</b> RIVERSIDE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17868-042				

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

<b>PAGE TOTAL</b>
\$ 500.00

**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> DEM STATE SENATE CAMP COM	<b>Reporting Period</b> <b>From:</b> <u>1/1/2009</u> <b>To:</b> <u>12/31/2009</u>
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				DATE			AMOUNT	
Full Name of Contributor WILLIAM P. LONGWORTH JR.				MO	DAY	YEAR	\$ 30.00	
Mailing Address 115 MILLER RD				12	7	2009		
City	CLARKS SUMMIT	State	PA					

Full Name of Contributor WILLIAM P. LONGWORTH JR.				MO	DAY	YEAR	\$ 30.00
Mailing Address 115 MILLER RD				12	15	2009	
City CLARKS SUMMIT	State PA	Zip Code (Plus 4) 18411-921					

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

<b>PAGE TOTAL</b>
\$ 60.00

## 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.**

<b>Name of Filing Committee or Candidate</b>  DEM STATE SENATE CAMP COM	<b>Reporting Period</b>  <b>From:</b> <u>1/1/2009</u> <b>To:</b> <u>12/31/2009</u>
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DATE				AMOUNT
Full Name of Contributing Committee	MO	DAY	YEAR	
PENNSYLVANIA REALTORS				
Mailing Address 4501 CHAMBERS HILL RD				
City HARRISBURG	11	24	2009	\$ 500.00
State PA				
Zip Code (Plus 4) 17111-240				
Full Name of Contributing Committee	MO	DAY	YEAR	
CITIZENS FOR HUGHES				
Mailing Address 7478 RHOADS ST STE A				
City PHILADELPHIA	12	3	2009	\$ 2,000.00
State PA				
Zip Code (Plus 4) 19151-292				
Full Name of Contributing Committee	MO	DAY	YEAR	
KEYSTONE STATE AUCTIONEERS PAC				
Mailing Address 1215 W SOUTHERN AVE SOUTH WILLIAMSPORT				
City WILLIAMSPORT	12	7	2009	\$ 500.00
State PA				
Zip Code (Plus 4) 17702-714				
Full Name of Contributing Committee	MO	DAY	YEAR	
PECOPAC				
Mailing Address 2301 MARKET ST				
City PHILADELPHIA	12	7	2009	\$ 1,000.00
State PA				
Zip Code (Plus 4) 19103-133				
Full Name of Contributing Committee	MO	DAY	YEAR	
PREA ACRE ACCOUNT				
Mailing Address 212 LOCUST ST STE 600				
City HARRISBURG	12	7	2009	\$ 500.00
State PA				
Zip Code (Plus 4) 17101-151				

Full Name of Contributing Committee BUCHANAN INGERSOLL COMMITTEE FOR EFFECTIVE STATE			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 3020 E RIDGE DR			12	10	2009	
City GIBSONIA	State PA	Zip Code (Plus 4) 15044-612				
Full Name of Contributing Committee GGR INC PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 212 LOCUST ST STE 600			12	10	2009	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101-151				
Full Name of Contributing Committee PA FRATERNAL ORDER OF POLICE			MO	DAY	YEAR	\$ 500.00
Mailing Address 2949 N FRONT ST			12	10	2009	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110-125				
Full Name of Contributing Committee PA INSURANCE PAC			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 1600 MARKET ST STE 1520			12	10	2009	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103-720				
Full Name of Contributing Committee PLUMBERS UNION LOCAL 27			MO	DAY	YEAR	\$ 500.00
Mailing Address 1040 MONTOUR WEST IND PARK			12	10	2009	
City CORAOPOLIS	State PA	Zip Code (Plus 4) 15108-930				
Full Name of Contributing Committee 1776 PAC			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 3031A WALTON RD STE 201			12	15	2009	
City PLYMOUTH MEETING	State PA	Zip Code (Plus 4) 19462				

Full Name of Contributing Committee PREA ACRE ACCOUNT			MO	DAY	YEAR	\$ 500.00
Mailing Address 212 LOCUST ST STE 600			12	15	2009	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101-151				

Full Name of Contributing Committee STEAMFITTER'S LOCAL UNION 420			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 14420 TOWNSEND RD			12	29	2009	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19154-102				

Full Name of Contributing Committee LOCAL 66			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 111 ZETA DR LOCAL 66 OPERATING ENGINEERS			12	30	2009	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15238-281				

Full Name of Contributing Committee PA. COMMITTEE FOR AFFORDABLE HOUSING			MO	DAY	YEAR	\$ 500.00
Mailing Address 600 N 12TH ST			12	31	2009	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043-121				

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

<b>PAGE TOTAL</b>
\$ 16,000.00

**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.)**

<b>Name of Filing Committee or Candidate</b>  DEM STATE SENATE CAMP COM	<b>Reporting Period</b>  <b>From:</b> <u>1/1/2009</u> <b>To:</b> <u>12/31/2009</u>
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
MR. JOHN S. PALUMBO							
<b>Mailing Address</b> 1007 COLUMBIA ST				12	15	2009	\$ 200.00
<b>City</b> SCRANTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18509-171					
<b>Employer Name</b> PALUMBO GROUP ARCHITECTS				<b>Occupation</b> ARCHITECT			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>		<b>State</b>	<b>Zip Code (Plus 4)</b>	

Full Name of Contributor				MO	DAY	YEAR	
MR. JOHN S. PALUMBO							
<b>Mailing Address</b> 1007 COLUMBIA ST				12	7	2009	\$ 200.00
<b>City</b> SCRANTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18509-171					
<b>Employer Name</b> PALUMBO GROUP ARCHITECTS				<b>Occupation</b> ARCHITECT			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>		<b>State</b>	<b>Zip Code (Plus 4)</b>	

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

<b>PAGE TOTAL</b>
\$ 400.00



## 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.**

<b>Name of Filing Committee or Candidate</b>  DEM STATE SENATE CAMP COM	<b>Reporting Period</b>  <b>From:</b> <u>1/1/2009</u> <b>To:</b> <u>12/31/2009</u>
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				DATE	AMOUNT	
Full Name			MO	DAY	YEAR	
FULTON BANK						
<b>Mailing Address</b> 200 NORTH 3RD STREET			12	30	2009	\$ 0.28
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101				
<b>Receipt Description</b>						

**Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.**

<b>PAGE TOTAL</b>
\$ 0.28

## 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>	
DEM STATE SENATE CAMP COM		From: <u>1/1/2009</u> To: <u>12/31/2009</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 III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
DEM STATE SENATE CAMP COM	From <u>1/1/2009</u> To: <u>12/31/2009</u>

DATE				AMOUNT		
To Whom Paid DAWN M BOWMAN			MO	DAY	YEAR	\$ 400.00
Mailing Address 299 LEVEL RD			12	15	2009	
City HUMMELSTOWN	State PA	Zip Code (Plus 4) 17036-763	Description of Expenditure NOV./DEC. INTERN STIPEND			
To Whom Paid CLARK RESOURCES			MO	DAY	YEAR	\$ 1,400.00
Mailing Address 321 N FRONT ST			12	1	2009	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101-120	Description of Expenditure OFFICE RENT			
To Whom Paid COMCAST CABLE			MO	DAY	YEAR	\$ 237.09
Mailing Address PO BOX 3005			12	9	2009	
City SOUTHEASTERN	State PA	Zip Code (Plus 4) 19398-300	Description of Expenditure DESCRIPTION EXPENDITURE CABLE, PHONES, INTERNET			
To Whom Paid EZ PUBLISHING INC			MO	DAY	YEAR	\$ 19.95
Mailing Address 429 F ST			12	29	2009	
City DAVIS	State CA	Zip Code (Plus 4) 95616-415	Description of Expenditure PNC CARD			
To Whom Paid MIKE FLECK			MO	DAY	YEAR	\$ 471.26
Mailing Address 1121 LEHIGH ST			12	1	2009	
City EASTON	State PA	Zip Code (Plus 4) 18042	Description of Expenditure DESCRIPTION OF EXPENDITURE SD 24 EXPENSE REIMBURSEMENT			

To Whom Paid ANDREW GAFFNEY			MO	DAY	YEAR	\$ 465.80
Mailing Address 262 LEXINGTON ROAD			12	7	2009	
City SCHWENKSVILLE	State PA	Zip Code (Plus 4) 19473	Description of Expenditure DESCRIPTION OF EXPENDITURE SD24 REIMBURSEMENT			

To Whom Paid COREY GOLDINER			MO	DAY	YEAR	\$ 203.51
Mailing Address 237 EMERALD STREET			12	10	2009	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110	Description of Expenditure DESCRIPTION OF EXPENDITURE HEALTH INSURANCE AND EXPENSES			

To Whom Paid COREY GOLDINER			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 237 EMERALD STREET			12	11	2009	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110	Description of Expenditure DESCRIPTION OF EXPENDITURE PAYROLL			

To Whom Paid KEN SNYDER COMMUNICATIONS			MO	DAY	YEAR	\$ 25,000.00
Mailing Address 159 NUTT ROAD			12	21	2009	
City PHOENIXVILLE	State PA	Zip Code (Plus 4) 19460	Description of Expenditure DESCRIPTION OF EXPENDITURE CONSULTING FEES			

To Whom Paid KENNEDY PRINTING COMPANY INC.			MO	DAY	YEAR	\$ 649.08
Mailing Address 5534 BALTIMORE AVENUE			12	9	2009	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19143	Description of Expenditure DESCRIPTION OF EXPENDITURE MAILING			

To Whom Paid LSG STRATEGIES SERVICES CORP			MO	DAY	YEAR	\$ 11,254.00
Mailing Address D/B/A LSG STRATEGIES 2120 L STREET NW SUITE 305			12	15	2009	
City WASHINGTON	State DC	Zip Code (Plus 4) 20037	Description of Expenditure DESCRIPTION OF EXPENDITURE COMMUNICATION CONSULTATION			

To Whom Paid MACK CROUNSE GROUP			MO	DAY	YEAR	\$ 19,781.63
Mailing Address 2001 N BEAUREGARD ST			12	15	2009	
City ALEXANDRIA	State VA	Zip Code (Plus 4) 22311-173	Description of Expenditure DESCRIPTION OF EXPENDITURE SD 24 BALANCE			

To Whom Paid PENNSYLVANIA DEMOCRATIC PARTY NON FEDERAL ACCOUNT			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 300 N 2ND ST			12	22	2009	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101-131	Description of Expenditure DESCRIPTION OF EXPENDITURE CONTRIBUTION			

To Whom Paid POSTMASTER			MO	DAY	YEAR	\$ 224.00
Mailing Address 813 MARKET STREET			12	22	2009	
City HARRISBURG	State PA	Zip Code (Plus 4) 17105	Description of Expenditure DESCRIPTION OF EXPENDITURE HOLIDAY POSTCARD POSTAGE			

To Whom Paid PR PROMOTIONS OF MARYLAND			MO	DAY	YEAR	\$ 502.87
Mailing Address PO BOX 34407			12	15	2009	
City BETHESDA	State MD	Zip Code (Plus 4) 20827-040	Description of Expenditure DESCRIPTION OF EXPENDITURE SHIPPING CHARGES			

To Whom Paid MARTIN SANTALUCIA			MO	DAY	YEAR	\$ 335.00
Mailing Address 41 PETERS AVE APT 12			12	10	2009	
City MIDDLETOWN	State PA	Zip Code (Plus 4) 17057-192	Description of Expenditure DESCRIPTION OF EXPENDITURE CONSULTING FEES			

To Whom Paid MARTIN SANTALUCIA			MO	DAY	YEAR	\$ 750.00
Mailing Address 41 PETERS AVE APT 12			12	14	2009	
City MIDDLETOWN	State PA	Zip Code (Plus 4) 17057-192	Description of Expenditure DESCRIPTION OF EXPENDITURE CONSULTING FEES			

To Whom Paid MARTIN SANTALUCIA			MO	DAY	YEAR	\$ 170.50
Mailing Address 41 PETERS AVE APT 12			12	14	2009	
City MIDDLETOWN	State PA	Zip Code (Plus 4) 17057-192	Description of Expenditure DESCRIPTION OF EXPENDITURE CONSULTING FEES			

To Whom Paid MARTIN SANTALUCIA			MO	DAY	YEAR	\$ 635.00
Mailing Address 41 PETERS AVE APT 12			12	21	2009	
City MIDDLETOWN	State PA	Zip Code (Plus 4) 17057-192	Description of Expenditure DESCRIPTION OF EXPENDITURE CONSULTING			

To Whom Paid MARTIN SANTALUCIA			MO	DAY	YEAR	\$ 11.36
Mailing Address 41 PETERS AVE APT 12			12	21	2009	
City MIDDLETOWN	State PA	Zip Code (Plus 4) 17057-192	Description of Expenditure DESCRIPTION OF EXPENDITURE EXPENSE REIMBURSEMENTS			

To Whom Paid SPRINT			MO	DAY	YEAR	\$ 327.54
Mailing Address PO BOX 8077			12	1	2009	
City LONDON	State KY	Zip Code (Plus 4) 40742-807	Description of Expenditure DESCRIPTION OF EXPENDITURE INV#11162009.NOV/DEC BILL			

To Whom Paid KRISTEN STONER			MO	DAY	YEAR	\$ 1,807.69
Mailing Address 821 S SAINT BERNARD ST			11	27	2009	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19143-330	Description of Expenditure DESCRIPTION OF EXPENDITURE PAYROLL			

To Whom Paid KRISTEN STONER			MO	DAY	YEAR	\$ 1,807.69
Mailing Address 821 S SAINT BERNARD ST			12	11	2009	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19143-330	Description of Expenditure DESCRIPTION OF EXPENDITURE PAYROLL			



<b>To Whom Paid</b> KRISTEN STONER			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 821 S SAINT BERNARD ST			12	24	2009	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19143-330	<b>Description of Expenditure</b> DESCRIPTION OF EXPENDITURE PAYROLL			
<b>To Whom Paid</b> UNIGRAPHICS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 703A W SIMPSON ST			12	14	2009	
<b>City</b> MECHANICSBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17055-376	<b>Description of Expenditure</b> DESCRIPTION OF EXPENDITURE PRINTING FEES			
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b> \$ 74,547.04

## 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> DEM STATE SENATE CAMP COM				<b>Reporting Period</b> From: <u>1/1/2009</u> To: <u>12/31/2009</u>			
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DATE				Outstanding Balance of Debt		
<b>Name of Creditor</b> AFFLERBACH FOR SENATE COMMITTEE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2,000.00
<b>Mailing Address</b> 1222 LEHIGH ST			10	23	2000	
<b>City</b> ALLENTOWN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18103-380	<b>Description of Debt</b> LOAN			
DATE				Outstanding Balance of Debt		
<b>Name of Creditor</b> LESLIE ALTIERI			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 300.00
<b>Mailing Address</b> 4120 DOUGLAS DR.			12	10	2009	
<b>City</b> BETHLEHEM	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18020	<b>Description of Debt</b> CONSULTING FEES			
DATE				Outstanding Balance of Debt		
<b>Name of Creditor</b> KEN SNYDER COMMUNICATIONS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 10,493.13
<b>Mailing Address</b> 159 NUTT ROAD			12	31	2008	
<b>City</b> PHOENIXVILLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19460	<b>Description of Debt</b> CONSULTING FEES			
DATE				Outstanding Balance of Debt		
<b>Name of Creditor</b> MACK CROUNSE GROUP			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 5,091.80
<b>Mailing Address</b> 2001 N BEAUREGARD ST			12	31	2008	
<b>City</b> ALEXANDRIA	<b>State</b> VA	<b>Zip Code (Plus 4)</b> 22311-173	<b>Description of Debt</b> POLITICAL CONSULTING			

				DATE			Outstanding Balance of Debt
Name of Creditor RE-ELECT STEWART COMMITTEE				MO	DAY	YEAR	\$ 4,000.00
Mailing Address PO BOX 2 R.D. 5				10	23	2000	
City JOHNSTOWN	State PA	Zip Code (Plus 4) 15907-000	Description of Debt LOAN				
				DATE			Outstanding Balance of Debt
Name of Creditor CONNIE WILLIAMS				MO	DAY	YEAR	\$ 250,000.00
Mailing Address PO BOX 21				3	22	2005	
City HAVERFORD	State PA	Zip Code (Plus 4) 19041-002	Description of Debt LOAN				
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL \$ 271,884.93