### **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	80006	661			Rep File	orted B		CA	NDII	DATE		COMM	4ITTEE	<b>✓</b> [	LOB	BYIST		
Name of Filing C	ommittee, (	Candida	te or Lo	obbyist:		LAW	/REN	NCE C	O RE	P CC	DM .								
Street Address:	1105 D	EWEY A	AVE																
City:	NEW CA	ASTLE		_					State	e:	PA			Zip Cod	<b>le:</b> 16	101-6	817		
TYPE OF REPORT	6TH TUESDA PRE-PRIMAR		1.	2ND FRI PRIMARY	DAY PRE	- :	2.	30 DA		Р	OST-	3.		AMENDM REPORT?		Yes	N	0	<b>\</b>
(place X to the right of	6TH TUESDA PRE-ELECTION		4.	2ND FRI		E- !	5.	30 DA		Р	OST-	6.		TERMINA REPORT?		Yes	N	O	<b>\</b>
report type)	ANNUAL RE	PORT	7. <b>X</b>	Year 20	09				NG ME		_			PAPER		<b>\</b>	DISK	ETTE	
Name of Office S	ought by Ca	andidate	e:	-					DAT	ΕO	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	Cour	
									МО		DAY	YI	EAR			REF	)	37	
										11		3	2009		(SEE IN	STRUCTI	ONS FOR	CODES	)
Summary of		and	МО	DAY	YEAF	2			МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONLY		
Expenditures	from:			1	1 2	2009	Т	0		12	;	31	2009						
A. Amount Bro	ught Forwai	rd From	Last R	eport				\$					122.60						
B. Total Moneta	ary Contribu	ıtions A	nd Rec	eipts (Fr	om Sche	edule	I)	\$				7,	473.59						
C. Total Funds	Available (S	Sum Of I	Lines A	and B)				\$				7,8	396.19						
D. Total Expend	ditures (Fro	m Sche	dule II	[)				\$				6,8	343.02						
E. Ending Cash	Balance (S	ubtract	Line D	From Lin	e C)			\$				1,0	53.17						
F. Value Of In-	Kind Contrib	outions	Receive	ed (From	Schedu	ıle II	)	\$					0.00						
G. Unpaid Debt	s And Oblig	ations (	From S	chedule	IV)			\$					0.00						
					AFF	FIDA	١٧٧	T SE	CTIO	NC									
PART I - If this is		-	•	_									_		6 mars Jem ar			:_6	
I swear (or affirm) correct and comple		ort, inclu	iding the	attacheu	schedule	s med	ı on	рарег	ог ву е	electr	onic m	earum	, are to t	ne best o	г ту кпоч	vieuge	anu bei	ier , tr	ue
Sworn to and subs	cribed before day of	me this		20						•		5	Signature	of Perso	n Submitt	ing Re <sub>l</sub>	oort		
		Signature	e	_				-						Prin	ted Name	1			_
My Commission Ex	xpires							_						Emai	il				
	мо	)	D/	ΑY	YR						Are	ea Co	le	Daytim	e Teleph	one Nu	mber		ᆜ
Part II- If this is	a report of	a candi	idate's	authoriz	ed Comr	nitte	e, C	andid	ate si	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		est of my	y knowle	edge and b	elief this	s polit	ical	comm	ittee h	as no	ot viola	ted ar	y provis	ions of the	e act of Ju	ıne 3,1	937 (P.	L. 133	3,
Sworn to and subsc	ribed before r day of	ne this		20									s	ignature o	of Candida	ite			_
				-~ —				-						Printe	d Name				-
My Commission F	_	nature						-		-				Ema	il				_
My Commission Exp	es							_											_
		мо	D/	ΑY	YF	2					Area	Code		Da	ytime To	elephor	e Num	ber	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	Period		
LAWRENCE CO REP COM	From:	1/1/200	<u>9</u> To:	12/31/2009
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	Period	(1)	\$	4,373.59
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)			\$	2,350.00
TOTAL for the Reporting	Period	(2)	\$	2,350.00
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)			\$	750.00
TOTAL for the Reporting	Period	(3)	\$	750.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	Period	(4)	\$	0.00
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			\$	7,473.59

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			-			
Name of Filing Committee or Candidate				porting	Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			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

### 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			orting Pe					
LAWRENCE CO REP COM			Froi	m:	1/1/2	2009 <b>T</b> o	):	12/31/2009
					DATE			AMOUNT
Full Name of Contributor ANTHONY CIOFFI				МО	DAY	YEAR		
Mailing Address 1131 BROOKSHIRE	DR						\$	150.00
City NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16101		10	23	2009		
Full Name of Contributor STEVEN'S MASONRY				МО	DAY	YEAR		
Mailing Address 175 OLDE COLONY  City NEW CASTLE	DRIVE State PA	<b>Zip Code (Plus 4)</b> 16105		10	23	2009	\$	100.00
Full Name of Contributor JOE PASCOE				МО	DAY	YEAR		
Mailing Address 1136 BROOKSHIRE	DRIVE						\$	100.00
City NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16101		10	23	2009		
Full Name of Contributor GEORGE FREED				МО	DAY	YEAR		
Mailing Address 450 CONESTOGA TO  City PULASKI	State PA	<b>Zip Code (Plus 4)</b> 16143		10	1	2009	\$	100.00
Full Name of Contributor LIBERTY ROOFING				МО	DAY	YEAR		
Mailing Address 315 GREEN RIDGE	RD. #B						\$	100.00
City NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16105		10	1	2009		

				FAGL 5
Full Name of Contributor				
DON FOX	МО	DAY	YEAR	
Mailing Address 441 PETERSBURG ROAD				<b>\$</b> 100.00
City ENON VALLEY State Zip Code (Plus 4)	10	1	2009	
PA 16120				
Full Name of Contributor		DAY	VEAD	
WAYNE ALEXANDER	МО	DAY	YEAR	
Mailing Address 332 E. LINCOLN AVENUE				<b>\$</b> 250.00
City NEW CASTLE State Zip Code (Plus 4)	10	1	2009	
PA 16101				
Full Name of Contributor THEO MCCRACKEN	мо	DAY	YEAR	
Mailing Address 825 BECKFORD STREET				\$ 100.00
City NEW CASTLE State Zip Code (Plus 4)	9	29	2009	
PA 16101				
	МО	DAY	YEAR	
Full Name of Contributor	МО			<b>\$</b> 100.00
Full Name of Contributor  EMMETT & REBECCA SHAFFER  Mailing Address 315 JONES ST	<b>MO</b>	<b>DAY</b> 22	<b>YEAR</b> 2009	<b>\$</b> 100.00
Full Name of Contributor EMMETT & REBECCA SHAFFER  Mailing Address 315 JONES ST				<b>\$</b> 100.00
Full Name of Contributor  EMMETT & REBECCA SHAFFER  Mailing Address 315 JONES ST  City NEW CASTLE  State Zip Code (Plus 4)				\$ 100.00
Full Name of Contributor  EMMETT & REBECCA SHAFFER  Mailing Address 315 JONES ST  City NEW CASTLE  State Zip Code (Plus 4) PA 16101  Full Name of Contributor	9	22	2009 YEAR	\$ 100.00 \$ 100.00
Full Name of Contributor  EMMETT & REBECCA SHAFFER  Mailing Address 315 JONES ST  City NEW CASTLE  State Zip Code (Plus 4) 16101  Full Name of Contributor  ED & PAM FOSNAUGHT	9	22	2009	
Full Name of Contributor  EMMETT & REBECCA SHAFFER  Mailing Address 315 JONES ST  City NEW CASTLE State Zip Code (Plus 4) PA 16101  Full Name of Contributor ED & PAM FOSNAUGHT  Mailing Address 3344 SHAFFER ROAD	9 <b>MO</b>	22 DAY	2009 YEAR	
Full Name of Contributor  EMMETT & REBECCA SHAFFER  Mailing Address 315 JONES ST  City NEW CASTLE  State PA 16101  Full Name of Contributor  ED & PAM FOSNAUGHT  Mailing Address 3344 SHAFFER ROAD  City ELLWOOD CITY  State Zip Code (Plus 4)  16101	9 <b>MO</b>	22 DAY	2009 YEAR	
Full Name of Contributor  EMMETT & REBECCA SHAFFER  Mailing Address 315 JONES ST  City NEW CASTLE State PA 16101  Full Name of Contributor  ED & PAM FOSNAUGHT  Mailing Address 3344 SHAFFER ROAD  City ELLWOOD CITY State PA 16117  Full Name of Contributor	<b>мо</b>	22 DAY	2009 YEAR 2009	
Full Name of Contributor EMMETT & REBECCA SHAFFER  Mailing Address 315 JONES ST  City NEW CASTLE  State PA 16101  Full Name of Contributor ED & PAM FOSNAUGHT  Mailing Address 3344 SHAFFER ROAD  City ELLWOOD CITY  State PA 16117  Full Name of Contributor BOB ROBBINS	<b>мо</b>	22 DAY	2009 YEAR 2009	<b>\$</b> 100.00

				FAGL 6
Full Name of Contributor	мо	DAY	YEAR	
DAVID & CAROL KENNADAY	110		12/11	
Mailing Address 221 SUMMER AVENUE			2000	<b>\$</b> 100.00
City NEW CASTLE State Zip Code (Plus 4)	9	1	2009	
PA 16105				
Full Name of Contributor DAVID & WENDY BARENSFELD	МО	DAY	YEAR	
Mailing Address BOX 889				<b>\$</b> 100.00
City ELLWOOD CITY State Zip Code (Plus 4)	9	1	2009	
PA 16117				
Full Name of Contributor KATHLEEN NORD	МО	DAY	YEAR	
Mailing Address 216 FAIRFIELD AVENUE				<b>\$</b> 100.00
City NEW CASTLE State Zip Code (Plus 4)	8	6	2009	
DA 1610E				
PA 16105				
Full Name of Contributor  JEFFREY & SHARON MEYER	МО	DAY	YEAR	
Full Name of Contributor	МО	DAY	YEAR	\$ 100.00
Full Name of Contributor  JEFFREY & SHARON MEYER		DAY 6	<b>YEAR</b> 2009	\$ 100.00
Full Name of Contributor  JEFFREY & SHARON MEYER  Mailing Address 592 JOHNSTON ROAD  State State 7 in Code (Plus 4)				\$ 100.00
Full Name of Contributor  JEFFREY & SHARON MEYER  Mailing Address 592 JOHNSTON ROAD  City NEW WILMINGTON State Zip Code (Plus 4)				\$ 100.00
Full Name of Contributor  JEFFREY & SHARON MEYER  Mailing Address 592 JOHNSTON ROAD  City NEW WILMINGTON State PA 16142  Full Name of Contributor	8	6	2009	\$ 100.00 \$ 100.00
Full Name of Contributor  JEFFREY & SHARON MEYER  Mailing Address 592 JOHNSTON ROAD  City NEW WILMINGTON  State   Zip Code (Plus 4)   16142  Full Name of Contributor  NATHAN SCHAFER	- 8 MO	6	2009	
Full Name of Contributor  JEFFREY & SHARON MEYER  Mailing Address 592 JOHNSTON ROAD  City NEW WILMINGTON State PA 16142  Full Name of Contributor NATHAN SCHAFER  Mailing Address 1105 DEWEY AVENUE	- 8 MO	DAY	2009 YEAR	
Full Name of Contributor  JEFFREY & SHARON MEYER  Mailing Address 592 JOHNSTON ROAD  City NEW WILMINGTON  Full Name of Contributor  NATHAN SCHAFER  Mailing Address 1105 DEWEY AVENUE  City NEW CASTLE  State Zip Code (Plus 4)  16142  Zip Code (Plus 4)	- 8 MO	DAY	2009 YEAR	
Full Name of Contributor  JEFFREY & SHARON MEYER  Mailing Address 592 JOHNSTON ROAD  City NEW WILMINGTON State PA 16142  Full Name of Contributor  NATHAN SCHAFER  Mailing Address 1105 DEWEY AVENUE  City NEW CASTLE State PA 16101  Full Name of Contributor	MO 8	6 <b>DAY</b>	2009  YEAR  2009	
Full Name of Contributor  JEFFREY & SHARON MEYER  Mailing Address 592 JOHNSTON ROAD  City NEW WILMINGTON State PA 16142  Full Name of Contributor NATHAN SCHAFER  Mailing Address 1105 DEWEY AVENUE  City NEW CASTLE State PA 16101  Full Name of Contributor NATHAN SCHAFER	8 MO 8	6 <b>DAY</b>	2009 YEAR 2009	\$ 100.00

Full Name of Contributor MR. & MRS. WILLIAM SCHATER			мо	DAY	YEAR	
Mailing Address 1105 DEWEY	Y AVENUE					\$ 100.00
City NEW CASTLE	State	Zip Code (Plus 4)	8	6	2009	
	PA	16101				
Full Name of Contributor MR. & MRS. WILLIAM SCHATER	·		мо	DAY	YEAR	
	/ AVENUE			DAY		\$ 150.00
MR. & MRS. WILLIAM SCHATER	/ AVENUE	Zip Code (Plus 4)	мо 10	DAY 1	<b>YEAR</b> 2009	\$ 150.00

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

**PAGE TOTAL \$** 2,350.00

#### **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			ng Period					
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Committ	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed 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				orting Pe	riod				
LAWRENCE CO REP COM  Fr			Fror	m:	1/1/2	<u>009</u> To	<u>12/31/2009</u>		
				D	ATE		AMOUNT		
Full Name of Contributor NICKS AUTO BODY				мо	DAY	YEAR			
Mailing 833 SOUTH MILL STR Address	EET			_			\$ 750.00		
City NEW CASTLE	State	Zip Code (Plus	5 4)	9	22	2009			
	PA	16101							
Employer Name				Occupat	tion	UTO BC	DDY SHOP		
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code (Plus 4)		
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page,	Section	on 3.		4	<b>PAGE TOTAL</b> 750.00		

## 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 or Car	Name of Filing Committee or Candidate			Reporting Period				
			From:			To:		
				D	ATE		А	MOUNT
Full Name				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	·	·						
Enter Grand Total of Part E on	Schedule T. Detailed	d Summary Page	Section	4			P	AGE TOTAL
	2, <b>200</b> 0000		22300				\$	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>1/1/2009</u> <b>To:</b>	<u>12/31/2009</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
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,		\$	0.00

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Candidate			Reporting	9 Period				
Fı				From: To:				
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						<b>\$</b>	0.00	
City	State	Zip Code (Plus 4)						
Description of Contribution:								
Enter Grand Total of Part F on Sch	odulo II. In Vin	d Contributions Data	ilad Sum	mary Dag			DAGE TOTAL	
Section 2.	edule II, III-KIN	iu Contributions Deta	ilieu Sum	шагу Рас	je,		PAGE TOTAL	
						\$	0.00	

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Reporting Period								
					Fro	om:		To	ł			
							DATE				AMOUNT	•
Full Name of Contributor						мо	DAY	YEAR				
Mailing Address										\$		0.00
City	State		Zip Code(I	Plus 4)								
Employer of Contributor					Occupation							
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Desc	ripti	ion of (	Contribut	ion
Enter Grand Total of Part G on Sci Summary Page, Section 3.	hedule II, I	In-Kind	Contributi	ons De	etaile	ed					PAGE TO	0.00

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period							
LAWRENCE CO REP COM			From	1/	То:	12/31/2009				
				DATE						
To Whom Paid TMS NOTARY			МО	DAY	YEAR					
Mailing Address 3219 U.S. 422			1	27	2009	\$	8.00			
City NEW CASTLE State PA Zip Code (Plus 4) 16101				Description of Expenditure 2008 REPORT NOTARY						
To Whom Paid NORTHWEST CAMCUS			МО	DAY	YEAR					
Mailing Address TREAS. SHEILA STERRETT 234 HARBOR ROAD			1	27	2009	\$	135.00			
City ERIE	State PA	<b>Zip Code (Plus 4)</b> 16511	Description of Expenditure 2009 DUES.							
To Whom Paid JOSEPH WALTENBOUGH	·	·	мо	DAY	YEAR					
Mailing Address 127 HILLC	REST AVENUE		4	28	2009	\$	125.00			
City NEW CASTLE State PA 2ip Code (Plus 4) 16105			Description of Expenditure WEBSITE							
To Whom Paid  LAWRENCE COUNTY FARM SHOW				DAY	YEAR					
Mailing Address 464 MIDWAY DRIVE			6	16	2009	\$	100.00			
City         NEW CASTLE         State         Zip Code (Plus 4)           PA         16101			Description of Expenditure EXHIBIT BOOTH DEPOSIT							

	PA	16101	EXHIBIT BOOTH DEPOSIT					
To Whom Paid LAWRENCE COUNTY FARM SHOW			МО	DAY	YEAR			
Mailing Address 464 MIDWAY DRIVE			8	4	2009	\$	453.00	
City NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16101	<b>Descrip</b> EXHIBI					
			•					

<b>To Whom Paid</b> CHRISTIAN BENICASE	МО	DAY	YEAR						
Mailing Address 603 W. MADISON AVENUE				21	2009	\$	600.00		
City NEW CASTLE	NEW CASTLE State Zip Code (Plus 4) PA 16102				Description of Expenditure CANDIDATE BANQUET CATERING				
To Whom Paid WILLIAM SCHATER				DAY	YEAR				
Mailing Address 1105 DEWEY AVENUE				22	2009	\$	582.18		
City NEW CASTLE State PA Zip Code (Plus 4) 16101			Description of Expenditure HARRISBURG TRIP REIMBURSEMENT						
To Whom Paid THE COPY SHOP			МО	DAY	YEAR				
Mailing Address 3447 WILMINGTON ROAD				12	2009	\$	51.94		
City NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16105	Description of Expenditure EVENT TICKET PRINTING						
To Whom Paid			мо	DAY	YEAR				
BUTZ FLOWERS									
Mailing Address 120 E. WASHING	GTON STREET		10	12	2009	\$	108.65		
Mailing Address	State PA	<b>Zip Code (Plus 4)</b> 16101	Descrip	12 otion of Exp AL GIFT		-	108.65		
Mailing Address 120 E. WASHING	State		Descrip	tion of Exp		-	108.65		
Mailing Address 120 E. WASHING City NEW CASTLE To Whom Paid	State PA		<b>Descrip</b> FUNERA	otion of Exp AL GIFT	penditure	-	2,200.00		
Mailing Address 120 E. WASHING  City NEW CASTLE  To Whom Paid  MEDURES CATERING	State PA		Descrip FUNERA  MO  10  Descrip	AL GIFT	YEAR 2009	\$			
Mailing Address 120 E. WASHING  City NEW CASTLE  To Whom Paid MEDURES CATERING  Mailing Address 2500 NEW BUTL	State PA  ER ROAD  State	2ip Code (Plus 4)	Descrip FUNERA  MO  10  Descrip	DAY  23  Otion of Exp	YEAR 2009	\$			
Mailing Address 120 E. WASHING  City NEW CASTLE  To Whom Paid MEDURES CATERING  Mailing Address 2500 NEW BUTL  City NEW CASTLE  To Whom Paid	State PA  ER ROAD  State PA	2ip Code (Plus 4)	MO  10  Descrip ANNUA	DAY  23  Dition of Exp  L BANQUE	YEAR 2009 Denditure T CATERI	\$			

							HOL 10
To Whom Paid THE COPY SHOP			мо	DAY	YEAR		
Mailing Address 3447 WILMINGTON ROAD			11	8	2009	\$	1,071.66
City NEW CASTLE PA 2ip Code (Plus 4) PA 16105		Description of Expenditure PRINTING OF AD BOOKLET					
To Whom Paid CIALLELLA & CARNEY FLORAL			мо	DAY	YEAR		
Mailing Address 1006 SOUTH MILL STREET			11	8	2009	\$	325.42
City NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16101	Description of Expenditure ANNUAL BANQUET DECORATION				
To Whom Paid WILLIAM SCHAFER			МО	DAY	YEAR		
Mailing Address 1105 DEWEY AVENUE			11	8	2009	\$	1,017.78
City NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16101	Description of Expenditure MISC. EXPENSES REIMBURSEMENT				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL	
		,				\$	6,843.02