### **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	90002	297			Rep File			CAN	IDI	DATE		COM	1ITTEE	<b>✓</b>	LOB	BYIS		
Name of Filing C	Committee	e, Candida	ate or L	obbyist:		PSP/	A Po	liical	Suppo	ort f	or Pol	itical	Action	_					-
Street Address:	600	ΓHIRD AV	'E																
City:	KING	STON							State	:	PA			Zip Cod	le: 18	3704-	5815		
TYPE OF REPORT	6TH TUES PRE-PRIM		1.	2ND FRIDA PRIMARY	Y PRE-	- 2	2.	30 DA		P	OST-	3.		AMENDM REPORT?		Yes		OV	<b>/</b>
(place X to the right of	6TH TUES PRE-ELEC		4. <b>X</b>	2ND FRIDA ELECTION	AY PRE	- 5	5.	30 DA		P	OST-	6.		TERMINA REPORT?		Yes		No	<b>\</b>
report type)	eport type) ANNUAL REPORT 7. Year 2010 FILING ( ) CHI												PAPER		<b>\</b>	DIS	KETTE		
Name of Office S	- Sought by	Candidat	e:						DATE	E OI	F ELE	CTIO	N	District Number	Office Code	Pa	rty Co	de Cou	
									МО		DAY	YE	AR		10000			1	
										11		2	2010		(SEE IN	STRUCT	IONS FO	R CODES	5)
Summary of		and	МО	DAY	YEAR				МО		DAY	YI	AR	FO	R OFFI	CE USI	ONL	Y	
Expenditures	from:			1 1	. 20	010	T	0		9		13	2010						
A. Amount Bro	ught Forv	vard From	ı Last R	eport				\$				3,0	51.23						
B. Total Moneta	ary Contri	ibutions A	And Rec	eipts (Fron	n Sche	dule	I)	\$					0.00						
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$				3,0	)51.23						
D. Total Expenditures (From Schedule III)							\$				3,0	00.00							
E. Ending Cash	Balance	(Subtract	Line D	From Line	C)			\$					51.23						
F. Value Of In-	Kind Cont	ributions	Receive	ed (From S	chedu	le II)	)	\$					0.00						
G. Unpaid Debt	s And Ob	ligations	(From S	Schedule IV	/)			\$					0.00			'			
					AFF	IDA	VI	ΓSE	CTIO	N									
PART I - If this is		•	•								•		_						
I swear (or affirm) correct and complete		eport, inclu	uding the	attached sc	hedules	filed	on	paper	or by el	lectr	onic m	edium	, are to t	he best o	f my knov	wledge	and b	elief , tr	rue
Sworn to and subs	cribed befo	ore me this		20						•		S	ignature	of Perso	n Submitt	ing Re	port		_
	<u> </u>	a						-		-				Prin	ted Name	<u> </u>			-
My Commission Ex	cpires	Signatur	e							-				Emai	il .				_
	•	мо	D	AY	YR			-		-	Are	ea Coc	le		e Teleph	one N	ımber		_
Part II- If this is	a report	of a cand	idate's	authorized	l Comm	nittee	e, Ca	andid	ate sh	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		e best of m	y knowle	edge and beli	ief this	politi	ical	comm	ittee ha	as no	ot viola	ted an	y provisi	ions of the	e act of J	une 3,1	.937 (I	P.L. 133	3,
Sworn to and subsc	ribed befor	e me this											Si	ignature o	f Candida	ate			- $ $
	day of —							-						Drinto	d Name				_
		Signature						-						Frinte	и мате				_
My Commission Exp										-				Ema	il				_
	_	мо	D	AY	YR			•			Area	Code		Da	ytime T	elepho	ne Nur	nber	-

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Detailed Sammary Lug				
Name of Filing Committee or Candidate	Reporting	Period		
PSPA Poliical Support for Political Action	From:	1/1/201	<u>0</u> To:	9/13/2010
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)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	0.00
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			\$	0.00

#### **PART A**

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

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			•			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
	From: To:					:		
		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 Fining Committee of Candidate					Reporting Period From: To:					
					DATE		ı	AMOUNT		
Full Name of Contributor				МО	DAY	YEAR				
Mailing Address							\$	0	0.00	
City	State	Zip Code (Plus 4)	)							

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

**PAGE TOTAL**\$ 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 Candidate			Reporting Period						
			From:			То:			
				DA	TE		А	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary 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 Can	didate			Rep	orting Pe	riod			
				Froi	m:		То	:	
					D	ATE		AN	MOUNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	4)					
Employer Name	•	,			Occupa	tion	•	•	
Employer Mailing Address/Princi Business	pal Place of		City		•	State		Zip Code	e (Plus 4)
Enter Grand Total of Part C o	n Schedule I, Deta	iled Sumr	mary Page,	Section	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 or Car	ndidate		Report	ing Perio	od			
			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	l Summary Page.	Section	4.			P	AGE TOTAL
	2, <b>2000</b>		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		
PSPA Poliical Support for Political Action	From:	<u>1/1/2010</u> <b>To:</b>	<u>9/13/2010</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, 1		\$	0.00

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

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

Name of Filing Committee or Candidat	:e		Reporting	g Period			
			From:			То:	
				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	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidat	e				Re	porting P	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor	•		•			Occupa	tion			
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, i	In-Kind	Contributi	ons De	etaile	ed				<b>PAGE TOTAL</b> 0.00

### STATEMENT OF EXPENDITURES

Name of Filing Committee or	Candidate		Reporti	ng Period			
PSPA Poliical Support for Po	litical Action		From	1/2	1/2010	То:	9/13/2010
		•		DATE			AMOUNT
<b>To Whom Paid</b> Phyllis Mundy for State Repr	esentative		мо	DAY	YEAR		
Mailing Address 157 N Ga	137 N Gates Street				2010	\$	1,000.00
City Kingston PA Zip Code (Plus 4) 18704				otion of Expoution	penditure		
To Whom Paid Citizens For Yudichak			мо	DAY	YEAR		
Mailing Address 116 Thon	nas Street		9	1	2010	\$	1,000.00
<b>City</b> Larksville	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18709	<b>Descrip</b> Contrib	otion of Exp oution	penditure		
<b>To Whom Paid</b> Friends of Marianne Petrilla			МО	DAY	YEAR		
Mailing Address PO Box 4	21		9	8	2010	\$	1,000.00
City Drums	State PA	<b>Zip Code (Plus 4)</b> 18222	<b>Descrip</b> Contrib	otion of Exp oution	penditure		
	<u> </u>	1					PAGE TOTAL

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

3,000.00