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 :	ion	2006	317			Repo Filed	-		CANDI	DATE		СОМ	MITTEE	✓	LOB	BYIST		
Name of Filing C	Committe	e, Candida	ate or L	obbyist:			-		I OTT FRIE	ENDS C)F							
Street Address:		KEPP RD					,		-									
City:	PHIL	IPSBURG							State:	PA			Zip Co	de: 16	866			
TYPE OF REPORT	6TH TUES PRE-PRIM		1.	2ND FRIDA PRIMARY	Y PRE	- 2.		0 DA RIMA		POST-	3.		AMENDN REPORT		Yes	Γ	lo	\checkmark
(place X to the right of	6TH TUES PRE-ELEC	-	4.	2ND FRIDA ELECTION	Y PRE	≣- 5.	ELECTION				POST- 6.			TERMINATION REPORT?			lo	\checkmark
report type)	ANNUAL	. REPORT	7. X	Year 2010					IG METHO CHECK OI				PAPER		\checkmark	DISK	ETTE	
Name of Office S	L Sought by	/ Candidat	te:						DATE O	F ELEC	CTIC	DN	District Number	Office Code	Par	ty Cod	e Cou Cod	
LIEUTENANT G		D							мо	DAY	Y	EAR		LTG	DEN	1	-	
LIEUTENANT G	OVERNO	К							11		2	2010	 	(SEE INS	TRUCTI	ONS FO	R CODE	5)
Summary of		s and	мо	DAY	YEAR	2			мо	DAY	Y	EAR	FC	OR OFFIC	E USE	ONLY	(
Expenditures	s from:			1 1	2	010	то)	12	3	1	2010						
A. Amount Bro	ught Forv	ward Fron	n Last R	leport				\$			10,	990.28						
B. Total Monet	ary Contr	ibutions A	And Rec	eipts (Fron	n Sche	dule I))	\$			5,4	414.23						
C. Total Funds	Available	e (Sum Of	Lines A	and B)				\$			16,	404.51						
D. Total Expen	ditures (I	From Sche	edule II	I)				\$			1,7	765.61						
E. Ending Cash	Balance	(Subtract	Line D	From Line	C)			\$			14,6	538.90						
F. Value Of In-	Kind Con	tributions	Receiv	ed (From S	chedu	le II)		\$				0.00						
G. Unpaid Debt	ts And Ob	oligations	(From S	Schedule I\	/)			\$				0.00						
					AFF	IDAV	ΊT	SE	CTION									
PART I - If this is																		
I swear (or affirm) correct and comple		report, incl	uding th	e attached sc	hedule	s filed o	n pa	per o	or by elect	ronic me	dium	i, are to i	the best o	f my knov	vledge	and be	lief , t	rue
Sworn to and subs	cribed bef day of	ore me this		20							9	Signature	e of Perso	n Submitt	ing Rep	oort		-
	_	Signatur	re				_						Prin	ted Name				-
My Commission Ex	kpires		-										Ema	il				-
		мо	D	AY	YR					Are	a Co	de	Daytin	ne Teleph	one Nu	mber		
Part II- If this is	a report	of a cand	lidate's	authorized	Comm	nittee,	Can	dida	ate shall	sign he	re.							
I swear (or affirm) No 320) as amende		ne best of m	ıy knowl	edge and bel	ief this	politica	al co	ommi	ittee has n	ot violat	ed ar	ny provis	ions of th	e act of Ju	ine 3,1	937 (P	.L. 133	33,
Sworn to and subso	ribed befo day of	re me this		20								s	ignature (of Candida	ite			-
													Printe	ed Name				-
My Commission Exp		Signature											Ema	il				—
	-	мо	D	AY	YR	1				Area (Code		D	aytime Te	elephor	e Num	ber	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** CONKLIN, SCOTT FRIENDS OF From: <u>1/1/2010</u> **To:** 12/31/2010 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 32.04 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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)** 5,382.19 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 5,382.19 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 5,414.23 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

PAGE 3

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 Candida	Name of Filing Committee or Candidate				Period			
			Fro	m:		То	:	
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	4)					
					-		Γ	PAGE TOTAL

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

0.00

\$

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)								
Name of Filing Committee or Candidat	e		Rep	orting P	eriod			
			Fror	m:		То):	
					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	Schedule I, Detai	led Summary Pag	je, Se	ection 2	2.		\$	0.00

PAGE 5

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	idate		Reporting	Reporting Period						
CONKLIN, SCOTT FRIENDS OF			From:	<u>1/1/2010</u> To: <u>12/31/2010</u>						
				DA	TE		A	MOUNT		
Full Name of Contributing Commit CONKLIN FOR LT GOVERNOR	tee			мо	DAY	YEAR				
Mailing Address 339 KEPP ROA	D						\$	5,382.19		
City PHILIPSBURG	State PA	Zip Cod 16866	e (Plus 4)	11	30	2010				
						ſ		PAGE TOTAL		
Enter Grand Total of Part C on	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	5,382.19		

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:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

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			Report	ing Perio	od					
Fro			From:	From: To:						
				D	ATE			AMOUNT	Г	
Full Name				мо	DAY	YEAR				
Mailing Address							\$	5	0.00	
City	State	Zip Code (Plus 4)							
Receipt Description	·						•			
Enter Grand Total of Part E on Sched	ule I. Detailed Sum	mary Page	Section	4				PAGE TO	TAL	
	are 1, Detailed Sum	iniai y Faye,	Section				\$		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		
CONKLIN, SCOTT FRIENDS OF	From:	<u>1/1/2010</u> To:	<u>12/31/2010</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 PAR	TF)		
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL
					4	6	0.00

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

Name of Filing Committee or Candidate					Rej	porting P	eriod			
						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						Occupat	tion			
Employer Mailing Address/Principal Place of City State Business					Zip 4)	Code(Plus	Descri	ption o	f Contribution	

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					
CONKLIN, SCOTT FRIENDS OF			From	<u>1/</u>	<u>1/2010</u>	То:	<u>12/31/2010</u>		
				DATE			AMOUNT		
To Whom Paid SAM'S CLUB			мо	DAY	YEAR				
Mailing Address BENNER PIKE			11	24	2010	\$	406.33		
City STATE COLLEGE	State PA	Zip Code (Plus 4) 16803		Description of Expenditure SUPPLIES					
To Whom Paid AT & T MOBILITY			мо	DAY	YEAR				
Mailing Address PO BOX 537104			11	23	2010	\$	48.69		
CityATLANTAStateZip Code (Plus 4)GA30353-710				Description of Expenditure PHONE SERVICE					
To Whom Paid 3WZ FIRST MEDIA RADIO			мо	DAY	YEAR				
Mailing Address 863 BENNER PIKE S	SUITE 200		12	2	2010	\$	1,000.00		
City STATE COLLEGE	State PA	Zip Code (Plus 4) 16801		ition of Exp TON FOR F			R CENTRE CO.		
To Whom Paid FRATERNAL ORDER OF POLICE			мо	DAY	YEAR				
Mailing Address C/O KENNETH ZITS	CH 51 HICKORY LANE	PO BOX 162	12	2	2010	\$	130.00		
City LANSE	State PA	Zip Code (Plus 4) 16849		ion of Exp ION OF FC		2			
To Whom Paid I CONTACT CORPORATION			мо	DAY	YEAR				
Mailing Address 2635 MERIDAN PAR	KWAY		12	7	2010	\$	74.00		
City DURHAM	State NC	Zip Code (Plus 4) 27713		otion of Exp					

							12
To Whom Paid AT & T MOBILITY			мо	DAY	YEAR		
Mailing Address PO BOX 537104			12	20	2010	\$	48.69
City ATLANTA	State GA	Zip Code (Plus 4) 30353-710	Description of Expenditure PHONE SERVICE				
To Whom Paid CHRIS KING			мо	DAY	YEAR		
Mailing Address 371 BARNSBURY RD.			12	27	2010	\$	32.90
City LANGHORNE	State PA	Zip Code (Plus 4) 19047	Description of Expenditure POSTAGE EXPENSE				
To Whom Paid MOSHANNON VALLY ECON PARTNERSHIP			мо	DAY	YEAR		
Mailing Address SHADY LANE			12	27	2010	\$	25.00
City PHILIPSBURG	State PA	Zip Code (Plus 4) 16866	Description of Expenditure DONATION				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	PAGE TOTAL 1,765.61