

COMMONWEALTH OF PENNSYLVANIA  
**CAMPAIGN FINANCE STATEMENT**

File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF	CANDIDATE	1.	COMMITTEE	2. <input checked="" type="checkbox"/>	LOBBYIST	3.
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST Fourth District Republican Committee								
STREET ADDRESS 1015 Aspen Dr								
CITY Mountaintop			STATE Pa		ZIP CODE 18707 -			
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY		DATE OF ELECTION	
6TH TUESDAY PRE-PRIMARY		all Republican offices		4th	R		MO.	DAY
2ND FRIDAY PRE-PRIMARY		DATES OF REPORTING PERIOD		MO.	DAY	YEAR	MO.	DAY
30 DAY POST-PRIMARY		1 1 10		TO	5 3 10		5	4
6TH TUESDAY PRE-ELECTION		CASH BALANCE AT END OF REPORTING PERIOD:		\$ 546.57		FOR OFFICE USE ONLY		
2ND FRIDAY PRE-ELECTION		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:		\$ -		RECEIVED		
30 DAY POST-ELECTION		AMENDMENT REPORT?		YES	NO	2010 JUN -1 PM 2:		
ANNUAL REPORT		TERMINATION REPORT?		YES	NO	BOARD OF ELECTIONS LUZERNE COUNTY, PA		

**AFFIDAVIT SECTION**

**PART I -**

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.  
 If statement is filed on behalf of a Candidate, the Candidate must sign here.  
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS  
 5th DAY OF May 20 10  
 Patricia A. Tokash  
 SIGNATURE

Holly M Quinn  
 SIGNATURE OF PERSON SUBMITTING REPORT  
 Holly M Quinn  
 PRINTED NAME

MY COMMISSION EXPIRES 9 19 2013  
 MO. DAY YR.

570 868 5055  
 AREA CODE DAYTIME TELEPHONE NUMBER

**PART II -**

If statement is filed on behalf of a Candidate's Authorized Committee Candidate, the Candidate must 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.

Notarial Seal  
 Patricia A. Tokash, Notary Public  
 City of Wilkes-Barre, Luzerne County  
 My Commission Expires Sept. 19, 2013  
 Member, Pennsylvania Association of Notaries

SWORN TO AND SUBSCRIBED BEFORE ME THIS  
 DAY OF 20  
 SIGNATURE

SIGNATURE OF CANDIDATE  
 PRINTED NAME

MY COMMISSION EXPIRES MO. DAY YR.

AREA CODE DAYTIME TELEPHONE NUMBER