

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	<input checked="" type="checkbox"/>	LOBBYIST	3.
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <b>COMMITTEE TO ELECT BROUCE KNICK</b>								
STREET ADDRESS <b>2 SUNSET LANE</b>								
CITY <b>DUPONT</b>			STATE <b>PA</b>		ZIP CODE <b>18641</b>			
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY		DATE OF ELECTION	
6TH TUESDAY PRE-PRIMARY 1.		<b>PITTSFORD AREA SCHOOL DIRECTOR</b>		<b>3<sup>rd</sup></b>	<b>DEM</b>		MO.	DAY
2ND FRIDAY PRE-PRIMARY 2.							18	2010
30 DAY POST-PRIMARY 3. <input checked="" type="checkbox"/>								
6TH TUESDAY PRE-ELECTION 4.								
2ND FRIDAY PRE-ELECTION 5.								
30 DAY POST-ELECTION 6.								
ANNUAL REPORT 7.								
		DATES OF REPORTING PERIOD		MO. DAY YEAR		MO. DAY YEAR		
				<b>05 04 10</b>		<b>06 07 10</b>		
		CASH BALANCE AT END OF REPORTING PERIOD:		\$		<b>595.59</b>		
		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:		\$		<b>0</b>		
		AMENDMENT REPORT?		YES	NO	<input checked="" type="checkbox"/>		
		TERMINATION REPORT?		YES	NO	<input checked="" type="checkbox"/>		
						FOR OFFICE USE ONLY		
						<b>RECEIVED</b> <b>2010 JUN 11 PM 1:42</b> <b>BOARD OF ELECTIONS LUZERNE COUNTY, PA.</b>		

**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  
**7<sup>TH</sup>** DAY OF **JUNE** 20**10**

**Harold Wesley**  
 SIGNATURE OF PERSON SUBMITTING REPORT

**HAROLD WESLEY**  
 PRINTED NAME

MY COMMISSION EXPIRES **23, 2013**  
 DAY YR.

**570 655-5441**  
 AREA CODE DAYTIME TELEPHONE NUMBER

COMMONWEALTH OF PENNSYLVANIA

**PART II - NOTARIAL SEAL**

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

SWORN TO AND SUBSCRIBED BEFORE ME THIS  
**7<sup>TH</sup>** DAY OF **JUNE** 20**10**

**Harold Wesley**  
 SIGNATURE

**Brouce Knick**  
 SIGNATURE OF CANDIDATE

**BROUCE KNICK**  
 PRINTED NAME

MY COMMISSION EXPIRES **23, 2013**  
 DAY YR.

**570 430-7577**  
 AREA CODE DAYTIME TELEPHONE NUMBER

**NOTARIAL SEAL**  
**HAROLD E. WESLEY**  
 Notary Public  
 DUPONT BOROUGH, LUZERNE COUNTY  
 My Commission Expires Nov 22, 2011