

Commonwealth of Pennsylvania
CAMPAIGN FINANCE REPORT

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification Number:		Report Filed By:		CANDIDATE ^{1.}	COMMITTEE ^{2.}	LOBBYIST ^{3.}			
Name of Filing Committee, Candidate or Lobbyist: <i>Nanticoke Democratic Comm Htee</i>									
Street Address: <i>252 Middle Rd</i>									
City: <i>Nanticoke PA</i>			State:		Zip Code: <i>18634</i>				
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST PRIMARY	3.	AMENDMENT REPORT?	YES	NO
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST ELECTION	6.	TERMINATION REPORT?	YES	NO
	ANNUAL REPORT	7.	YEAR	<i>2010</i>		FILING METHOD (<input checked="" type="checkbox"/>) CHECK ONE		PAPER	DISKETTE

Name of Office Sought by Candidate:			DATE OF ELECTION			District Number	Office Code	Party Code	County Code
MO.	DAY	YEAR	MO.	DAY	YEAR				
<i>5</i>	<i>18</i>	<i>2010</i>				<i>4</i>		<i>D</i>	<i>40</i>
(SEE INSTRUCTIONS FOR CODES)									

Summary of Receipts and Expenditures from:	MO.	DAY	YEAR	To	MO.	DAY	YEAR	FOR OFFICE USE ONLY
	<i>1</i>	<i>1</i>	<i>2010</i>		<i>6</i>	<i>2</i>	<i>2010</i>	
A. Amount Brought Forward From Last Report	\$						2010 JUN 17 PM 1:38 RECEIVED BOARD OF ELECTIONS LUZERNE COUNTY, PA.	
B. Total Monetary Contributions and Receipts (From Schedule I)	\$		<i>534.00</i>					
C. Total Funds Available (Sum of Lines A and B)	\$		<i>534.00</i>					
D. Total Expenditures (From Schedule III)	\$		<i>345.00</i>					
E. Ending Cash Balance (Subtract Line D from Line C)	\$		<i>189.00</i>					
F. Value of In-Kind Contributions Received (From Schedule II)	\$		<i>0</i>					
G. Unpaid Debts and Obligations (From Schedule IV)	\$		<i>0</i>					

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules, on paper or computer diskette, are to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this *16* day of *JUNE* 19-*2010*

Ann Marie Ceppa
 Signature

John A. Kurowski
 Signature of Person Submitting Report

JOHN A. KUROWSKI
 Printed Name

My commission expires *AUG 7* 2012.
 MO. DAY YR.

570
 Area Code

735-3258
 Daytime Telephone Number

PART II - If this is a report of a Candidate's Authorized Committee, candidate shall 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 _____ day of _____ 19____

 Signature

 Signature of Candidate

 Printed Name

My commission expires _____ MO. DAY YR.

 Area Code

 Daytime Telephone Number

Ann Marie Ceppa, Notary Public
 City of Nanticoke, Luzerne County
 My Commission Expires Aug. 7, 2012
 Member, Pennsylvania Association of Notaries

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate <i>Montlake Private Committee</i>	Reporting Period From <i>1-1-10</i> To <i>6-2-10</i>
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period	(1) \$ <i>534.00</i>

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	\$
All Other Contributions (Part B)	\$
TOTAL for the Reporting Period	(2) \$ <i>0</i>

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$
All Other Contributions (Part D)	\$
TOTAL for the Reporting Period	(3) \$ <i>0</i>

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)	
TOTAL for the Reporting Period	(4) \$ <i>0</i>

TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)	\$ <i>534.00</i>
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SCHEDULE III
STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate <u>Nantuxke Democratic Party</u>	Reporting Period From <u>1-1-10</u> To <u>6-2-10</u>
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To Whom Paid	MO.	DAY	YEAR	Amount
<u>Nantuxke Food Bank</u>	<u>3</u>	<u>9</u>	<u>2010</u>	\$ <u>345.00</u>
Mailing Address		Description of Expenditure		
City <u>Nantuxke</u>	State <u>PA</u>	Zip Code (Plus 4) <u>15634</u>		
To Whom Paid		MO.	DAY	YEAR
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4)		
To Whom Paid		MO.	DAY	YEAR
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4)		
To Whom Paid		MO.	DAY	YEAR
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4)		
To Whom Paid		MO.	DAY	YEAR
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4)		
To Whom Paid		MO.	DAY	YEAR
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4)		
To Whom Paid		MO.	DAY	YEAR
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4)		
To Whom Paid		MO.	DAY	YEAR
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4)		
To Whom Paid		MO.	DAY	YEAR
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 345.00