

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	LOBBYIST 3	
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <b>Committee to Re-elect Bohw/Marianacci WA School Bd</b>						
STREET ADDRESS <b>167 E. 8th St</b>						
CITY <b>Wyoming</b>		STATE <b>PA</b>	ZIP CODE <b>18644</b>			
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE <b>School Director</b>	DISTRICT NO.	PARTY <b>D/R</b>	DATE OF ELECTION		
				MO.	DAY	YEAR
6TH TUESDAY PRE-PRIMARY	1.			<b>11</b>	<b>3</b>	<b>2009</b>
2ND FRIDAY PRE-PRIMARY	2.					
30 DAY POST-PRIMARY	3.					
6TH TUESDAY PRE-ELECTION	4.					
2ND FRIDAY PRE-ELECTION	5.					
30 DAY POST-ELECTION	6.					
ANNUAL REPORT	7.					<b>X</b>

  

DATES OF REPORTING PERIOD MO. DAY YEAR TO MO. DAY YEAR <b>11 23 09 TO 12 31 09</b>	CASH BALANCE AT END OF REPORTING PERIOD: \$ <b>Ø</b>	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <b>Ø</b>
AMENDMENT REPORT? YES <input type="checkbox"/> NO <input type="checkbox"/>	TERMINATION REPORT? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	

  

FOR OFFICE USE ONLY	
<b>RECEIVED</b> <b>2010 FEB - 1 AM 10:19</b> <b>BOARD OF ELECTIONS</b> <b>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

**1st** DAY OF **February** 20**11**

*[Signature]*  
 SIGNATURE

MY COMMISSION EXPIRES **5/17/11**  
 MO. DAY YR.

*[Signature]*  
 SIGNATURE OF PERSON SUBMITTING REPORT

**Danielle Tirpak**  
 PRINTED NAME

**570** **693-1940**  
 AREA CODE DAYTIME TELEPHONE NUMBER

**PART II -**  
 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

**1st** DAY OF **February** 20**11**

*[Signature]*  
 SIGNATURE

MY COMMISSION EXPIRES **5/17/11**  
 MO. DAY YR.

*[Signature]*  
 SIGNATURE OF CANDIDATE

**John Bohw**  
 PRINTED NAME

**570** **693-1940**  
 AREA CODE DAYTIME TELEPHONE NUMBER

COMMONWEALTH OF PENNSYLVANIA  
 NOTARIAL SEAL  
 Cheryl A. Digiacomo, Notary Public  
 Plains Twp., Luzerne County  
 My commission expires May 17, 2011

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DATES OF REPORTING PERIOD  
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**11 23 09 TO 12 31 09**

CASH BALANCE AT END OF REPORTING PERIOD: \$ **Ø**

TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ **Ø**

AMENDMENT REPORT?	YES		NO	
TERMINATION REPORT?	YES	<b>X</b>	NO	

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 LUZERNE COUNTY, PA.**

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**[Signature]**  
 SIGNATURE OF PERSON SUBMITTING REPORT

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 PRINTED NAME

**570** **693-1940**  
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 MO. DAY YR.

**[Signature]**  
 SIGNATURE OF CANDIDATE

**John T. MARIANACCI**  
 PRINTED NAME

**570** **693-2279**  
 AREA CODE DAYTIME TELEPHONE NUMBER