

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 <i>FRIENDS OF VITO DELUCA</i>					
STREET ADDRESS <i>556 FIFTH STREET MANOR</i>					
CITY <i>WEST WYOMING</i>		STATE <i>PA</i>	ZIP CODE <i>18644 -</i>		
TYPE OF REPORT (CHECK ONE) <input type="checkbox"/> 1. 6TH TUESDAY PRE-PRIMARY <input type="checkbox"/> 2. 2ND FRIDAY PRE-PRIMARY <input type="checkbox"/> 3. 30 DAY POST-PRIMARY <input type="checkbox"/> 4. 6TH TUESDAY PRE-ELECTION <input type="checkbox"/> 5. 2ND FRIDAY PRE-ELECTION <input type="checkbox"/> 6. 30 DAY POST-ELECTION <input checked="" type="checkbox"/> 7. ANNUAL REPORT	NAME OF OFFICE SOUGHT BY CANDIDATE <i>DISTRICT ATTORNEY</i>		DISTRICT NO.	PARTY <i>DEM</i>	DATE OF ELECTION MO. DAY YEAR <i>11 06 2007</i>
	DATES OF REPORTING PERIOD MO. DAY YEAR TO MO. DAY YEAR <i>01 01 2009 TO 12 31 2009</i>		FOR OFFICE USE ONLY BOARD OF ELECTIONS LUZERNE COUNTY, PA. 10 FEB - 1 PM 1:25 RECEIVED		
	CASH BALANCE AT END OF REPORTING PERIOD: \$ <i>1,251.88</i>				
	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <i>0</i>				
	AMENDMENT REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>				
	TERMINATION REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>				

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
26 DAY OF *January* 20*10*
 SIGNATURE
 MY COMMISSION EXPIRES *Aug 28 2010*
 MO. DAY YR.

SIGNATURE OF PERSON SUBMITTING REPORT
Thomas Scarpaticci
 THOMAS SCARPATICCI
 PRINTED NAME
 570 693-5010
 AREA CODE DAYTIME TELEPHONE NUMBER

NOTARIAL SEAL
 STEPHEN J. BACHMAN, NOTARY PUBLIC
 CITY OF NANTICOKE, LUZERNE CO.
 MY COMMISSION EXPIRES AUG. 28, 2010

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
26 DAY OF *January* 20*10*
 SIGNATURE
 MY COMMISSION EXPIRES *Aug 28 2010*
 MO. DAY YR.

SIGNATURE OF CANDIDATE
VITO P. DELUCA
 VITO P. DELUCA
 PRINTED NAME
 570 288-8000
 AREA CODE DAYTIME TELEPHONE NUMBER

Department of State • Bureau of Commissions, Elections and Legislation
 303 North Office Building • Harrisburg, PA 17120-0029 • (717) 787-5280

NOTARIAL SEAL
 STEPHEN J. BACHMAN, NOTARY PUBLIC
 CITY OF NANTICOKE, LUZERNE CO.
 MY COMMISSION EXPIRES AUG. 28, 2010