

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: <input type="checkbox"/>		Report Filed By: <input type="checkbox"/>		CANDIDATE ^{1.} <input type="checkbox"/>		COMMITTEE ^{2.} <input checked="" type="checkbox"/>		LOBBYIST ^{3.} <input type="checkbox"/>			
Name of Filing Committee, Candidate or Lobbyist: DURVEA DEMOCRATIC ORGANIZATION											
Street Address: c/o 551 POND ST.											
City: DURVEA				State: PA.		Zip Code: 18642 1447					
TYPE OF REPORT (place X to the right of report type)	8TH TUESDAY PRE-PRIMARY ^{1.}		2ND FRIDAY PRE-PRIMARY ^{2.}		30 DAY POST PRIMARY ^{3.}		AMENDMENT REPORT? YES <input type="checkbox"/> NO <input type="checkbox"/>				
	8TH TUESDAY PRE-ELECTION ^{4.}		2ND FRIDAY PRE-ELECTION ^{5.}		30 DAY POST ELECTION ^{6.}		TERMINATION REPORT? YES <input type="checkbox"/> NO <input type="checkbox"/>				
	ANNUAL REPORT ^{7.}		YEAR 2009		FILING METHOD () CHECK ONE <input type="checkbox"/>		PAPER <input type="checkbox"/>		DISKETTE <input type="checkbox"/>		
Name of Office Sought by Candidate:					DATE OF ELECTION			District Number	Office Code	Party Code	County Code
					MO.	DAY	YEAR				
								(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from: <input type="checkbox"/>			MO. DAY YEAR			MO. DAY YEAR			FOR OFFICE USE ONLY RECEIVED 2010 FEB - 1 PM 1:21 BOARD OF ELECTIONS LUZERNE COUNTY, PA.		
			A. Amount Brought Forward From Last Report			\$ 677.50					
B. Total Monetary Contributions and Receipts (From Schedule I)			\$ -								
C. Total Funds Available (Sum of Lines A and B)			\$ 677.50								
D. Total Expenditures (From Schedule III)			\$ 								
E. Ending Cash Balance (Subtract Line D from Line C)			\$ 677.50								
F. Value of In-Kind Contributions Received (From Schedule II)			\$ NONE								
G. Unpaid Debts and Obligations (From Schedule IV)			\$ NONE								

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

30 day of January 2010
Theresa Wychocki
 Signature

My commission expires 8 2 2010
 MO. DAY YR.

Audrey Collier Marcinko
 Signature of Person Submitting Report

AUDREY COLLIER MARCINKO
 Printed Name

(570) 457-4377 (SAME)
 Area Code 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 _____ 20____

 Signature

My commission expires _____
 MO. DAY YR.

 Signature of Candidate

 Printed Name

 Area Code Daytime Telephone Number