

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 LYNN EVANS 2009																		
STREET ADDRESS 51 East Carey Street																		
CITY Plains	STATE Pa	ZIP CODE 18705 -																
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE Wilkes Barre Area School Director	DISTRICT NO.	PARTY Rep/ Dem	DATE OF ELECTION														
				MO.	DAY	YEAR												
6TH TUESDAY PRE-PRIMARY ^{1.}				11	03	2009												
2ND FRIDAY PRE-PRIMARY ^{2.}				FOR OFFICE USE ONLY														
30 DAY POST-PRIMARY ^{3.}				2009 DEC - 3 AM 10: 35 RECEIVED BOARD OF ELECTIONS LUZERNE COUNTY, PA.														
6TH TUESDAY PRE-ELECTION ^{4.}	DATES OF REPORTING PERIOD																	
2ND FRIDAY PRE-ELECTION ^{5.}	<table border="1"> <tr> <th>MO.</th> <th>DAY</th> <th>YEAR</th> </tr> <tr> <td>10</td> <td>20</td> <td>2009</td> </tr> </table> TO <table border="1"> <tr> <th>MO.</th> <th>DAY</th> <th>YEAR</th> </tr> <tr> <td>11</td> <td>23</td> <td>2009</td> </tr> </table>						MO.	DAY	YEAR	10	20	2009	MO.	DAY	YEAR	11	23	2009
MO.	DAY	YEAR																
10	20	2009																
MO.	DAY	YEAR																
11	23	2009																
30 DAY POST-ELECTION ^{6.} <input checked="" type="checkbox"/>	CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>1886.88</u> TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>0</u>																	
ANNUAL REPORT ^{7.}	<table border="1"> <tr> <td>AMENDMENT REPORT?</td> <td>YES</td> <td>NO</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>TERMINATION REPORT?</td> <td>YES</td> <td>NO</td> <td><input checked="" type="checkbox"/></td> </tr> </table>			AMENDMENT REPORT?	YES	NO	<input checked="" type="checkbox"/>	TERMINATION REPORT?	YES	NO	<input checked="" type="checkbox"/>							
AMENDMENT REPORT?	YES	NO	<input checked="" type="checkbox"/>															
TERMINATION REPORT?	YES	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 2nd DAY OF December 20 2009

 SIGNATURE OF PERSON SUBMITTING REPORT
 John M. Kochanski

 COMMONWEALTH OF PENNSYLVANIA
 Notarial Seal
 Lynn M. Evans, Notary Public
 Plains Twp, Luzerne County
 My Commission Expires Jan. 13, 2010

 SIGNATURE
 Lynn M. Evans

 MY COMMISSION EXPIRES
 MO. DAY YR.
 01 13 2010

 AREA CODE
 570

 PRINTED NAME
 814-4462

 DAYTIME TELEPHONE NUMBER

Member, Pennsylvania Association of Notaries

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 2 DAY OF December 2009

 SIGNATURE OF CANDIDATE
 LYNN EVANS

 PRINTED NAME
 LYNN EVANS

 DAYTIME TELEPHONE NUMBER
 820 4048

 SIGNATURE
 Amber Evans

 MY COMMISSION EXPIRES
 MO. DAY YR.
 01 30 2013

 AREA CODE
 570

 DAYTIME TELEPHONE NUMBER

COMMONWEALTH OF PENNSYLVANIA
 2009 NOTARIAL SEAL
 AMBER EVANS, NOTARY PUBLIC
 WILKES BARRE TWP, LUZERNE COUNTY
 MY COMMISSION EXPIRES JAN 30, 2013