

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 <sup>1.</sup>	COMMITTEE <sup>2.</sup> <input checked="" type="checkbox"/>	LOBBYIST <sup>3.</sup>
Name of Filing Committee, Candidate or Lobbyist: <i>Committee to Elect Tom Leighton</i>				
Street Address: <i>138 Reliance Dr.</i>				
City: <i>Wilkes Barre</i>		State: <i>PA</i>	Zip Code: <i>18702-1641</i>	
TYPE OF REPORT  (place X to the right of report type)	8TH TUESDAY PRE-PRIMARY <sup>1.</sup>	2ND FRIDAY PRE-PRIMARY <sup>2.</sup>	30 DAY POST-PRIMARY <sup>3.</sup>	AMENDMENT REPORT? YES <input type="checkbox"/> NO <input type="checkbox"/>
	8TH TUESDAY PRE-ELECTION <sup>4.</sup>	2ND FRIDAY PRE-ELECTION <sup>5.</sup>	30 DAY POST-ELECTION <sup>6.</sup> <input checked="" type="checkbox"/>	TERMINATION REPORT? YES <input type="checkbox"/> NO <input type="checkbox"/>
	ANNUAL REPORT <sup>7.</sup>	YEAR <i>2009</i>	FILING METHOD ( ) CHECK ONE <input checked="" type="checkbox"/>	PAPER <input checked="" type="checkbox"/> DISKETTE <input type="checkbox"/>

Name of Office Sought by Candidate:	DATE OF ELECTION	District Number	Office Code	Party Code	County Code
	MO: <i>11</i> DAY: <i>3</i> YEAR: <i>2009</i>				
	(SEE INSTRUCTIONS FOR CODES)				

Summary of Receipts and Expenditures from:	MO: <i>10</i> DAY: <i>20</i> YEAR: <i>2009</i>	To	MO: <i>11</i> DAY: <i>23</i> YEAR: <i>2009</i>	FOR OFFICE USE ONLY													
	<table border="1"> <tr> <td>A. Amount Brought Forward From Last Report</td> <td>\$ <i>118,891.60</i></td> </tr> <tr> <td>B. Total Monetary Contributions and Receipts (From Schedule I)</td> <td>\$ <i>-</i></td> </tr> <tr> <td>C. Total Funds Available (Sum of Lines A and B)</td> <td>\$ <i>118,891.60</i></td> </tr> <tr> <td>D. Total Expenditures (From Schedule III)</td> <td>\$ <i>225.00</i></td> </tr> <tr> <td>E. Ending Cash Balance (Subtract Line D from Line C)</td> <td>\$ <i>118,666.60</i></td> </tr> <tr> <td>F. Value of In-Kind Contributions Received (From Schedule II)</td> <td>\$ <i>-</i></td> </tr> <tr> <td>G. Unpaid Debts and Obligations (From Schedule IV)</td> <td>\$ <i>-</i></td> </tr> </table>				A. Amount Brought Forward From Last Report	\$ <i>118,891.60</i>	B. Total Monetary Contributions and Receipts (From Schedule I)	\$ <i>-</i>	C. Total Funds Available (Sum of Lines A and B)	\$ <i>118,891.60</i>	D. Total Expenditures (From Schedule III)	\$ <i>225.00</i>	E. Ending Cash Balance (Subtract Line D from Line C)	\$ <i>118,666.60</i>	F. Value of In-Kind Contributions Received (From Schedule II)	\$ <i>-</i>	G. Unpaid Debts and Obligations (From Schedule IV)
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RECEIVED  
 2009 DEC -3 AM 11:00  
 BOARD OF ELECTIONS  
 LUZERNE COUNTY, PA

**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 *2nd* day of *December* 20*09*

*Barbara A. Smith*  
Signature

*James J. Maloney*  
Signature of Person Submitting Report  
*JAMES J. MALONEY*  
Printed Name  
*570* Area Code *823-3851* Daytime Telephone Number

My commission expires COMMONWEALTH OF PENNSYLVANIA  
 MO. *NOV* DAY *NOV 15* YR. *2010*  
*BARBARA A. SMITH, Notary Public*  
 City of Wilkes-Barre, Luzerne County, PA

**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 *2nd* day of *December* 20*09*

*Barbara A. Smith*  
Signature

*Thomas M. Leighton*  
Signature of Candidate  
*Thomas M. Leighton*  
Printed Name  
*570* Area Code *825-5175* Daytime Telephone Number

My commission expires COMMONWEALTH OF PENNSYLVANIA  
 MO. *NOV* DAY *NOV 15* YR. *2010*  
*BARBARA A. SMITH, Notary Public*  
 City of Wilkes-Barre, Luzerne County, PA  
 My Commission Expires March 28, 2010

**SCHEDULE III  
STATEMENT OF EXPENDITURES**

Name of Filing Committee or Candidate <i>Committee to Elect Tom Leighton</i>	Reporting Period From <i>10/20/09</i> To <i>11/23/09</i>
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To Whom Paid <i>Friends of Bob Morgan</i>	MO. <i>10</i>	DAY <i>21</i>	YEAR <i>09</i>	Amount \$ <i>125.00</i>
Mailing Address <i>PO Box 805</i>		Description of Expenditure <i>Donation</i>		
City <i>Wilkes Barre</i>	State <i>PA</i>	Zip Code (Plus 4) <i>18703-</i>		

To Whom Paid <i>Friends of Nancy Bullau</i>	MO. <i>10</i>	DAY <i>21</i>	YEAR <i>09</i>	Amount \$ <i>100.00</i>
Mailing Address <i>79 N. Landon Ave</i>		Description of Expenditure <i>Donation</i>		
City <i>Kingston</i>	State <i>PA</i>	Zip Code (Plus 4) <i>18704</i>		

To Whom Paid	MO.	DAY	YEAR	Amount \$
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4) -		

To Whom Paid	MO.	DAY	YEAR	Amount \$
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4) -		

To Whom Paid	MO.	DAY	YEAR	Amount \$
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4) -		

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Mailing Address		Description of Expenditure		
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City	State	Zip Code (Plus 4) -		

To Whom Paid	MO.	DAY	YEAR	Amount \$
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4) -		

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

<b>PAGE TOTAL</b> \$ <i>225.00</i>
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