

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 FRIENDS OF LOU BARLETTA										
STREET ADDRESS 1529 TERRACE BLVA.										
CITY HAZLETON			STATE PA		ZIP CODE 18201					
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION				
6TH TUESDAY PRE-PRIMARY	1.			116	REP	MO.	DAY	YEAR		
2ND FRIDAY PRE-PRIMARY	2.					11	03	09		
30 DAY POST-PRIMARY	3.					FOR OFFICE USE ONLY				
6TH TUESDAY PRE-ELECTION	4.					<div style="text-align: center;"> <p>RECEIVED</p> <p>2009 OCT 23 AM 9:54</p> <p>BOARD OF ELECTIONS LUZERNE COUNTY, PA.</p> </div>				
2ND FRIDAY PRE-ELECTION	5. <input checked="" type="checkbox"/>	DATES OF REPORTING PERIOD		MO.	DAY				YEAR	
30 DAY POST-ELECTION	6.			9	15				09	
ANNUAL REPORT	7.			TO	10				19	09
		CASH BALANCE AT END OF REPORTING PERIOD:		\$ 21.05						
		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:		\$ 70,901.88						
		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
21 DAY OF **October** 20**09**

Cherie A. Homma
 SIGNATURE
 NOTARIAL SEAL
 CHERIE A. HOMMA, NOTARY PUBLIC
 HAZLETON, LUZERNE CO., PA.
 MY COMMISSION EXPIRES **12-12-09**
 MY COMMISSION EXP DEC 12, 2009

Francis J Barletta
 SIGNATURE OF PERSON SUBMITTING REPORT
FRANCIS J. BARLETTA
 PRINTED NAME
570 455-1200
 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
21 DAY OF **October** 20**09**

Cherie A. Homma
 SIGNATURE
 NOTARIAL SEAL
 CHERIE A. HOMMA, NOTARY PUBLIC
 HAZLETON, LUZERNE CO., PA.
 MY COMMISSION EXPIRES **12-12-09**
 MY COMMISSION EXP DEC 12, 2009

Lou Barletta
 SIGNATURE OF CANDIDATE
LOU BARLETTA
 PRINTED NAME
570 459-4910
 AREA CODE DAYTIME TELEPHONE NUMBER