

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 COMMITTEE TO ELECT BILL BARRETT TO CITY COUNCIL						
STREET ADDRESS c/o 36 WILCOX DRIVE						
CITY WILKES-BARRE			STATE PA	ZIP CODE 18705		
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION	
	COUNCIL CITY OF WILKES-BARRE		6TH	D	MO.	DAY
6TH TUESDAY PRE-PRIMARY	1.	DATES OF REPORTING PERIOD		FOR OFFICE USE ONLY		
2ND FRIDAY PRE-PRIMARY	2.	MO.	DAY	YEAR	2006 JAN 19 PM 3:07	
30 DAY POST-PRIMARY	3.	01	01	2005	RECEIVED	
6TH TUESDAY PRE-ELECTION	4.	TO	NO.	DAY	YEAR	BOARD OF ELECTIONS LUZERNE COUNTY, PA.
2ND FRIDAY PRE-ELECTION	5.	12	31	2005		
30 DAY POST-ELECTION	6.	CASH BALANCE AT END OF REPORTING PERIOD:		\$ -33 ²³		
ANNUAL REPORT	7. <input checked="" type="checkbox"/>	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:		\$ -733 ²³		
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
 16th DAY OF JANUARY 2006

Margaret M. Shirkos
 SIGNATURE

NOTARIAL SEAL
 MARGARET M. SHIRKOS, NOTARY PUBLIC
 CITY OF WILKES-BARRE, LUZERNE COUNTY
 MY COMMISSION EXPIRES JANUARY 28, 2007

Betty Jane Barrett
 SIGNATURE OF PERSON SUBMITTING REPORT

BETTY JANE BARRETT
 PRINTED NAME

570 208-4291
 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
 16th DAY OF JANUARY 2006

Margaret M. Shirkos
 SIGNATURE

NOTARIAL SEAL
 MARGARET M. SHIRKOS, NOTARY PUBLIC
 CITY OF WILKES-BARRE, LUZERNE COUNTY
 MY COMMISSION EXPIRES JANUARY 28, 2007

William Barrett
 SIGNATURE OF CANDIDATE

WILLIAM BARRETT
 PRINTED NAME

570 826-9131
 AREA CODE DAYTIME TELEPHONE NUMBER