

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 ^{1.}	COMMITTEE ^{2.} <input checked="" type="checkbox"/>	LOBBYIST ^{3.}
Name of Filing Committee, Candidate or Lobbyist: <u>Committee to Elect JOA D P. CORCORAN</u>					
Street Address: <u>20 SOUTH MAIN ST</u>					
City: <u>PLAINS</u>		State: <u>PA</u>	Zip Code: <u>18705 -</u>		
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.} <input checked="" type="checkbox"/>	YEAR <u>2007</u>	FILING METHOD <input checked="" type="checkbox"/> CHECK ONE	PAPER <input checked="" type="checkbox"/>	DISKETTE <input type="checkbox"/>
Name of Office Sought by Candidate: <u>CORONER</u>			DATE OF ELECTION		District Number
			MO. DAY YEAR		Office Code
			<u>11 6 2007</u>		Party Code
					County Code
(SEE INSTRUCTIONS FOR CODES)					

Summary of Receipts and Expenditures from:	MO. DAY YEAR	To	MO. DAY YEAR	FOR OFFICE USE ONLY
	<u>11 26 2007</u>		<u>12 31 2007</u>	
A. Amount Brought Forward From Last Report	\$ <u>427.08</u>			2008 JAN 23 PM 12:02 RECEIVED BOARD OF ELECTIONS LUZERNE COUNTY, PA.
B. Total Monetary Contributions and Receipts (From Schedule I)	\$ <u>0</u>			
C. Total Funds Available (Sum of Lines A and B)	\$ <u>427.08</u>			
D. Total Expenditures (From Schedule III)	\$ <u>187.11</u>			
E. Ending Cash Balance (Subtract Line D from Line C)	\$ <u>239.97</u>			
F. Value of In-Kind Contributions Received (From Schedule II)	\$			
G. Unpaid Debts and Obligations (From Schedule IV)	\$ <u>2,000.00</u>			

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 22ND day of January 2008

[Signature]
 Signature

My commission expires 06 09 2011
 MO. DAY YR.

[Signature]
 Signature of Person Submitting Report

MARY ANN W. CAMBERT
 Printed Name

570 821-7197
 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. 32) as amended.

Sworn to and subscribed before me this 06 09 2011 day of January 2011

[Signature]
 Signature

My commission expires 06 09 2011
 MO. DAY YR.

[Signature]
 Signature of Candidate

[Printed Name]
 Printed Name

[Area Code] [Daytime Telephone Number]
 Area Code Daytime Telephone Number

**SCHEDULE III
STATEMENT OF EXPENDITURES**

Name of Filing Committee or Candidate <u>COMMITTEE TO ELECT JOHN PROCCORAN</u>	Reporting Period From <u>11-26-07</u> To <u>12-31-07</u>
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To Whom Paid	MO.	DAY	YEAR	Amount
<u>CITIZENS VOICE</u>	<u>11</u>	<u>27</u>	<u>07</u>	<u>\$ 187.11</u>
Mailing Address		Description of Expenditure		
City <u>WILKES BARRE</u>	State <u>PA</u>	Zip Code (Plus 4) <u>18701</u>		<u>ADVERTISING</u>
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	State	Zip Code (Plus 4)		
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	State	Zip Code (Plus 4)		
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	State	Zip Code (Plus 4)		
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	State	Zip Code (Plus 4)		
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	State	Zip Code (Plus 4)		
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	State	Zip Code (Plus 4)		

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

PAGE TOTAL <u>\$ 187.11</u>

SCHEDULE IV STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period.

Name of Filing Committee or Candidate <i>Committee to Elect John P. Corcoran</i>	Reporting Period From <i>11-26-07</i> To <i>12-31-07</i>
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Name of Creditor <i>John P. Corcoran</i>				Outstanding Balance of Debt \$ <i>500.00</i>		
Mailing Address <i>20 South Main St</i>	DATE DEBT INCURRED	MO. <i>2</i>	DAY <i>02</i>	YEAR <i>07</i>		
City <i>PLAINS PA 18705</i>		State <i>PA</i>	Zip Code (Plus 4) <i>18705</i>			
Description of Debt <i>LOAN</i>						

Name of Creditor <i>John P. Corcoran</i>				Outstanding Balance of Debt \$ <i>1,000.00</i>		
Mailing Address <i>20 South Main St</i>	DATE DEBT INCURRED	MO.	DAY	YEAR		
City <i>PLAINS</i>		State <i>PA</i>	Zip Code (Plus 4) <i>18705</i>			
Description of Debt <i>LOAN</i>						

Name of Creditor <i>John P. Corcoran</i>				Outstanding Balance of Debt \$ <i>500.00</i>		
Mailing Address <i>20 South Main St</i>	DATE DEBT INCURRED	MO. <i>11</i>	DAY <i>2</i>	YEAR <i>07</i>		
City <i>PLAINS</i>		State <i>PA</i>	Zip Code (Plus 4) <i>18705</i>			
Description of Debt <i>LOAN</i>						

Name of Creditor				Outstanding Balance of Debt \$		
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR		
City		State	Zip Code (Plus 4)			
Description of Debt						

Name of Creditor				Outstanding Balance of Debt \$		
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR		
City		State	Zip Code (Plus 4)			
Description of Debt						

Name of Creditor				Outstanding Balance of Debt \$		
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR		
City		State	Zip Code (Plus 4)			
Description of Debt						

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.

PAGE TOTAL \$ <i>2,000.00</i>
