

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 Duryea Democratic Organization																	
STREET ADDRESS c/o 515 Green St																	
CITY Duryea		STATE PA	ZIP CODE 18642														
TYPE OF REPORT (CHECK ONE) <input type="checkbox"/> 1. 6TH TUESDAY PRE-PRIMARY <input type="checkbox"/> 2. 2ND FRIDAY PRE-PRIMARY <input type="checkbox"/> 3. 30 DAY POST-PRIMARY <input type="checkbox"/> 4. 6TH TUESDAY PRE-ELECTION <input type="checkbox"/> 5. 2ND FRIDAY PRE-ELECTION <input type="checkbox"/> 6. 30 DAY POST-ELECTION <input checked="" type="checkbox"/> 7. ANNUAL REPORT	NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION MO. DAY YEAR												
	DATES OF REPORTING PERIOD				FOR OFFICE USE ONLY												
	<table border="1"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>01</td><td>01</td><td>2005</td></tr> </table> TO <table border="1"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>01</td><td>31</td><td>2006</td></tr> </table>		MO.	DAY	YEAR	01	01	2005	MO.	DAY	YEAR	01	31	2006			RECEIVED 2006 FEB -7 PM 1:44 BOARD OF ELECTIONS LUZERNE COUNTY, PA
	MO.	DAY	YEAR														
	01	01	2005														
	MO.	DAY	YEAR														
	01	31	2006														
CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>205.10</u>																	
TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>00</u>																	
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 31 DAY OF January 2006

Audrey M. Zager
 SIGNATURE OF PERSON SUBMITTING REPORT
 Audrey M Zager
 PRINTED NAME

Audrey M Zager
 SIGNATURE
 570 AREA CODE
 457-2220 DAYTIME TELEPHONE NUMBER

Audrey M Zager
 SIGNATURE
 COMMONWEALTH OF PENNSYLVANIA
 Notarial Seal
 Ann R. Demmes, Notary Public
 Duryea Boro, Luzerne County
 My Commission Expires Mar. 25, 2009

PART II -

Member, Pennsylvania Association of Notaries
 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 _____ DAY OF _____ 20____

 SIGNATURE OF CANDIDATE

 PRINTED NAME

 SIGNATURE

 PRINTED NAME

MY COMMISSION EXPIRES _____ MO. _____ DAY _____ YR. _____ AREA CODE _____ DAYTIME TELEPHONE NUMBER _____