

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 <i>Evans 2005</i>					
STREET ADDRESS <i>51 East Carry St.</i>					
CITY <i>Plains</i>		STATE <i>Pa</i>	ZIP CODE <i>1705 -</i>		
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE	DISTRICT NO.	PARTY	DATE OF ELECTION	
	<i>Wilkes Barre Area School Director</i>			NO.	DAY YEAR
6TH TUESDAY PRE-PRIMARY ¹	DATES OF REPORTING PERIOD				FOR OFFICE USE ONLY RECEIVED 2006 OCT 27 PM 1:10 BOARD OF ELECTIONS LUZERNE COUNTY, PA.
2ND FRIDAY PRE-PRIMARY ²	MO. DAY YEAR	TO	MO. DAY YEAR		
30 DAY POST-PRIMARY ³	<i>06 06 06</i>		<i>10 23 06</i>		
6TH TUESDAY PRE-ELECTION ⁴	CASH BALANCE AT END OF REPORTING PERIOD:		\$ <i>28.19</i>		
2ND FRIDAY PRE-ELECTION ⁵ <input checked="" type="checkbox"/>	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:		\$ <i>0</i>		
30 DAY POST-ELECTION ⁶	AMENDMENT REPORT?	YES	NO	<input checked="" type="checkbox"/>	
ANNUAL REPORT ⁷	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 <i>26th</i> DAY OF <i>October</i> 20 <i>06</i>	<i>Marie V. Katsock</i> SIGNATURE OF PERSON SUBMITTING REPORT
COMMONWEALTH OF PENNSYLVANIA <i>Lynn M. Evans</i> Notary Signature Lynn M. Evans, Notary Public Plains Twp., Luzerne County My Commission Expires <i>3/2010</i>	<i>Marie V. Katsock</i> PRINTED NAME
Member, Pennsylvania Association of Notaries	<i>570</i> <i>823-6533</i> 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 <i>26th</i> DAY OF <i>October</i> 20 <i>06</i>	<i>Lynn M. Evans</i> SIGNATURE OF CANDIDATE
<i>Lynn M. Evans</i> SIGNATURE	<i>Lynn M. Evans</i> PRINTED NAME
MY COMMISSION EXPIRES <i>5/22/07</i>	<i>570</i> <i>820-4048</i> AREA CODE DAYTIME TELEPHONE NUMBER