

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. | LOBBYIST 3. <input checked="" type="checkbox"/> | |
| NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST 5TH DISTRICT DEMOCRATIC COMMITTEE | | | | | | |
| STREET ADDRESS 156 BUTLER ST. | | | | | | |
| CITY KINGSTON | | STATE PA | ZIP CODE 18704 | | | |
| TYPE OF REPORT (CHECK ONE) | NAME OF OFFICE SOUGHT BY CANDIDATE | DISTRICT NO. | PARTY | DATE OF ELECTION | | |
| | | | | MO. | DAY | YEAR |
| 6TH TUESDAY PRE-PRIMARY 1. | | | | 5 | 17 | 05 |
| 2ND FRIDAY PRE-PRIMARY 2. | | | | | | |
| 30 DAY POST-PRIMARY 3. <input checked="" type="checkbox"/> | | | | | | |
| 6TH TUESDAY PRE-ELECTION 4. | | | | | | |
| 2ND FRIDAY PRE-ELECTION 5. | | | | | | |
| 30 DAY POST-ELECTION 6. | | | | | | |
| ANNUAL REPORT 7. | | | | | | |

| | | | | | | | |
|---------------------------|----------|-----------|-----------|----|----------|----------|-----------|
| DATES OF REPORTING PERIOD | MO. | DAY | YEAR | TO | MO. | DAY | YEAR |
| | 3 | 28 | 05 | | 6 | 6 | 05 |

| | |
|--|---|
| CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>2829.06</u> | RECEIVED 2005 JUN 16 AM 10:30 BOARD OF ELECTIONS LUZERNE COUNTY, PA. |
| TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>0</u> | |

| | | | |
|---------------------|-----|--------------------------|--|
| AMENDMENT REPORT? | YES | <input type="checkbox"/> | <input checked="" type="checkbox"/> NO |
| TERMINATION REPORT? | YES | <input type="checkbox"/> | <input checked="" type="checkbox"/> NO |

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 June 2005

Ann Marie Cook
 SIGNATURE

MY COMMISSION EXPIRES 11 22 2008

COMMONWEALTH OF PENNSYLVANIA DAY YR.

Sarah T. Lottick
 SIGNATURE OF PERSON SUBMITTING REPORT

SARAH T. LOTTICK
 PRINTED NAME

AREA CODE _____ DAYTIME TELEPHONE NUMBER _____

PART II - ANN MARIE COOK, NOTARY PUBLIC
 If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must sign here.
 MY COMMISSION EXPIRES NOVEMBER 22, 2008

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

MY COMMISSION EXPIRES _____ MO. DAY YR.

 SIGNATURE OF CANDIDATE

 PRINTED NAME

AREA CODE _____ DAYTIME TELEPHONE NUMBER _____