

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: <input type="text"/>		Report Filed By: <input type="text"/>		1. CANDIDATE <input type="checkbox"/>		2. COMMITTEE <input checked="" type="checkbox"/>		3. LOBBYIST <input type="checkbox"/>		
Name of Filing Committee, Candidate or Lobbyist: <u>The Election Committee for Stephen Flood</u>										
Street Address: <u>1266 Saws Souci Parkway</u>										
City: <u>WILKES-BARRE</u>					State: <u>PA</u>		Zip Code: <u>18706 - 3705</u>			
TYPE OF REPORT (place X to the right of report type)	1. 5TH TUESDAY PRE-PRIMARY	<input type="checkbox"/>	2. 2ND FRIDAY PRE-PRIMARY	<input type="checkbox"/>	3. 30 DAY POST-PRIMARY	<input type="checkbox"/>	AMENDMENT REPORT?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
	4. 5TH TUESDAY PRE-ELECTION	<input checked="" type="checkbox"/>	5. 2ND FRIDAY PRE-ELECTION	<input type="checkbox"/>	6. 30 DAY POST-ELECTION	<input type="checkbox"/>	TERMINATION REPORT?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
	7. ANNUAL REPORT	<input type="checkbox"/>	YEAR: <u>2005</u>		FILING METHOD (check one)		PAPER		<input checked="" type="checkbox"/>	DISKETTE <input type="checkbox"/>

Name of Office Sought by Candidate: <u>NONE</u>				DATE OF ELECTION			District Number	Office Code	Party Code	County Code
MO.	DAY	YEAR		MO.	DAY	YEAR				
			<u>2005</u>	<u>11</u>	<u>8</u>	<u>2005</u>		<u>OTH</u>	<u>Dem</u>	<u>40</u>
(SEE INSTRUCTIONS FOR CODES)										

Summary of Receipts and Expenditures from:	MO.	DAY	YEAR	To	MO.	DAY	YEAR
	<u>6</u>	<u>7</u>	<u>2005</u>		<u>9</u>	<u>19</u>	<u>2005</u>
A. Amount Brought Forward From Last Report				\$	<u>220.38</u>		
B. Total Monetary Contributions and Receipts (From Schedule I)				\$	<u>-</u>		
C. Total Funds Available (Sum of Lines A and B)				\$	<u>220.38</u>		
D. Total Expenditures (From Schedule III)				\$	<u>-</u>		
E. Ending Cash Balance (Subtract Line D from Line C)				\$	<u>220.38</u>		
F. Value of In-Kind Contributions Received (From Schedule II)				\$	<u>-</u>		
G. Unpaid Debts and Obligations (From Schedule IV)				\$	<u>80,000.00</u>		

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BOARD OF ELECTIONS LUZERNE COUNTY, PA.	RECEIVED 005 SEP 26 PM 3:21

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 26TH day of SEPTEMBER 2005

NOTARIAL SEAL DAVID J. MUIROSKI, NOTARY PUBLIC CARLIN BOROUGH, LUZERNE COUNTY, PA. MY COMMISSION EXPIRES <u>3-25-2006</u>	Signature of Person Submitting Report <u>Heather Paulham</u> Printed Name <u>Heather Paulham</u> Area Code <u>(570)</u> Daytime Telephone Number <u>868-1100</u>
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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. 320) as amended.

Sworn to and subscribed before me this 26TH day of SEPTEMBER 2005

NOTARIAL SEAL DAVID J. MUIROSKI, NOTARY PUBLIC CARLIN BOROUGH, LUZERNE COUNTY, PA. MY COMMISSION EXPIRES <u>3-25-2006</u>	Signature of Candidate <u>Stephen L. Flood</u> Printed Name <u>Stephen L. Flood</u> Area Code <u>(570)</u> Daytime Telephone Number <u>868-1100</u>
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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 <u>THS Election Committee For STEPHEN FLOOD</u>	Reporting Period From <u>6/7/05</u> To <u>9/19/05</u>
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Name of Creditor <u>STEPHEN L. FLOOD</u>				Outstanding Balance of Debt \$ <u>80,000.00</u>	
Mailing Address <u>229 Country Club Dr</u>		DATE DEBT INCURRED <u>2001</u>	MO	DAY	YEAR
City <u>Mt. Top</u>		State <u>Pa</u>	Zip Code (Plus 4) <u>18707-</u>		
Description of Debt <u>Loan to Committee</u>					

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					

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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 \$ <u>80,000.00</u>
