

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.)

<b>Filer Identification Number:</b>	<b>Report Filed By:</b>	<input type="checkbox"/> CANDIDATE <sup>1.</sup>	<input checked="" type="checkbox"/> COMMITTEE <sup>2.</sup>	<input type="checkbox"/> LOBBYIST <sup>3.</sup>
Name of Filing Committee, Candidate or Lobbyist: <b>HANOVER AREA COMMITTEE</b>				
Street Address: <b>222 Lyndwood Ave</b>				
City: <b>HANOVER TOWNSHIP</b>		State: <b>PA</b>	Zip Code: <b>18702</b>	

<b>TYPE OF REPORT</b>  (place X to the right of report type)	<input type="checkbox"/> 6TH TUESDAY PRE-PRIMARY <sup>1.</sup>	<input type="checkbox"/> 2ND FRIDAY PRE-PRIMARY <sup>2.</sup>	<input type="checkbox"/> 30 DAY POST PRIMARY <sup>3.</sup>	<input type="checkbox"/> AMENDMENT REPORT? YES <input type="checkbox"/> NO
	<input type="checkbox"/> 6TH TUESDAY PRE-ELECTION <sup>4.</sup>	<input type="checkbox"/> 2ND FRIDAY PRE-ELECTION <sup>5.</sup>	<input checked="" type="checkbox"/> 30 DAY POST ELECTION <sup>6.</sup>	<input type="checkbox"/> TERMINATION REPORT? YES <input type="checkbox"/> NO
	<input type="checkbox"/> ANNUAL REPORT <sup>7.</sup>	<input type="checkbox"/> YEAR	<b>FILING METHOD</b> <input checked="" type="checkbox"/> CHECK ONE	<input type="checkbox"/> PAPER <input type="checkbox"/> DISKETTE

Name of Office Sought by Candidate:			<b>DATE OF ELECTION</b>			District Number	Office Code	Party Code	County Code
MO.	DAY	YEAR	MO.	DAY	YEAR				

(SEE INSTRUCTIONS FOR CODES)

<b>Summary of Receipts and Expenditures from:</b>					<b>FOR OFFICE USE ONLY</b>			
	MO.	DAY	YEAR	To	MO.	DAY	YEAR	RECEIVED DEC-4 PM 2:47 BOARD OF ELECTIONS ZERNE COUNTY, PA.
A. Amount Brought Forward From Last Report				\$				
B. Total Monetary Contributions and Receipts (From Schedule I)				\$				
C. Total Funds Available (Sum of Lines A and B)				\$				
D. Total Expenditures (From Schedule III)				\$				
E. Ending Cash Balance (Subtract Line D from Line C)				\$				
F. Value of In-Kind Contributions Received (From Schedule II)				\$				
G. Unpaid Debts and Obligations (From Schedule IV)				\$				

**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 4th day of December, 2006.

COMMONWEALTH OF PENNSYLVANIA  
 Notarial Seal  
 Mary R. Wallace, Notary Public  
 City of Wilkes-Barre, Luzerne County  
 My Commission Expires May 17, 2007  
 Member, Pennsylvania Association of Notaries

My commission expires \_\_\_\_\_ MO. \_\_\_\_\_ DAY \_\_\_\_\_ YR.

Signature of Person Submitting Report  
David Shipula  
**DAVID SHIPULA**  
 Printed Name  
570 823-8788  
 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. 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 \_\_\_\_\_

# CONTRIBUTIONS AND RECEIPTS

## Detailed Summary Page

Name of Filing Committee or Candidate <b>HANOVER AREA Committee</b>	Reporting Period From <b>10-23-2006</b> to <b>10-27-2006</b>
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<b>1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR</b>	
TOTAL for the Reporting Period	(1) \$ <b>- 0 -</b>

<b>2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)</b>	
Contributions Received from Political Committees (Part A)	\$ <b>- 0 -</b>
All Other Contributions (Part B)	\$
TOTAL for the Reporting Period	(2) \$ <b>- 0 -</b>

<b>3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)</b>	
Contributions Received from Political Committees (Part C)	\$
All Other Contributions (Part D)	\$
TOTAL for the Reporting Period	(3) \$ <b>- 0 -</b>

<b>4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)</b>	
TOTAL for the Reporting Period	(4) \$ <b>- 0 -</b>

<b>TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD</b> <i>(Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)</i>	\$ <b>- 0 -</b>
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**SCHEDULE III  
STATEMENT OF EXPENDITURES**

Name of Filing Committee or Candidate <b>HANOVER AREA Committee</b>	Reporting Period From <u>10-23-06</u> To <u>11-27-2006</u>
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To Whom Paid	MO.	DAY	YEAR	Amount
<b>HANOVER AREA Girls B-Ball Booster</b>	11	25	2006	\$ 100. <sup>00</sup>
Mailing Address <b>28 TANYA DRIVE</b>		Description of Expenditure <b>Advertising</b>		
City <b>HANOVER Township PA</b>	State <b>PA</b>	Zip Code (Plus 4) <b>18706</b>		
To Whom Paid	MO.	DAY	YEAR	Amount
				\$
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4)		
		-		
To Whom Paid	MO.	DAY	YEAR	Amount
				\$
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4)		
		-		
To Whom Paid	MO.	DAY	YEAR	Amount
				\$
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4)		
		-		
To Whom Paid	MO.	DAY	YEAR	Amount
				\$
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4)		
		-		
To Whom Paid	MO.	DAY	YEAR	Amount
				\$
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4)		
		-		
To Whom Paid	MO.	DAY	YEAR	Amount
				\$
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4)		
		-		
To Whom Paid	MO.	DAY	YEAR	Amount
				\$
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4)		
		-		

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

<b>PAGE TOTAL</b> \$ 100. <sup>00</sup>
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