

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 <input checked="" type="checkbox"/>	LOBBYIST ³																					
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST JENKINS TWP. DEMOCRATS																										
STREET ADDRESS 28 MARKET ST																										
CITY INKERMAN		STATE PA	ZIP CODE 18640 -																							
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE N/A	DISTRICT NO. 3RD	PARTY DEM	DATE OF ELECTION																						
				MO. 4	DAY 22	YEAR 2008																				
6TH TUESDAY PRE-PRIMARY 1.	<table border="1"> <tr> <td>MO.</td><td>DAY</td><td>YEAR</td> <td>TO</td> <td>MO.</td><td>DAY</td><td>YEAR</td> </tr> <tr> <td>4</td><td>7</td><td>08</td> <td></td> <td>5</td><td>12</td><td>08</td> </tr> </table> <p>CASH BALANCE AT END OF REPORTING PERIOD: \$ 384.14</p> <p>TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ 384.14</p> <table border="1"> <tr> <td>AMENDMENT REPORT?</td> <td>YES</td> <td>NO</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>TERMINATION REPORT?</td> <td>YES</td> <td>NO</td> <td><input checked="" type="checkbox"/></td> </tr> </table>	MO.	DAY	YEAR	TO	MO.	DAY	YEAR	4	7	08		5	12	08	AMENDMENT REPORT?	YES	NO	<input checked="" type="checkbox"/>	TERMINATION REPORT?	YES	NO	<input checked="" type="checkbox"/>	FOR OFFICE USE ONLY		
MO.		DAY	YEAR	TO	MO.	DAY	YEAR																			
4		7	08		5	12	08																			
AMENDMENT REPORT?		YES	NO	<input checked="" type="checkbox"/>																						
TERMINATION REPORT?		YES	NO	<input checked="" type="checkbox"/>																						
2ND FRIDAY PRE-PRIMARY 2.		<p>RECEIVED</p> <p>2008 MAY 22 AM 9:57</p> <p>BOARD OF ELECTIONS LUZERNE COUNTY, PA.</p>																								
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.																										

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
 21 DAY OF May 2008

Evelyn P. DelProra
 SIGNATURE
 MY COMMISSION EXPIRES Sept 10, 2010
 MO. DAY YR.

Deirdre M. Yandle
 SIGNATURE OF PERSON SUBMITTING REPORT
 DEIRDRE M. YANDLE
 PRINTED NAME
 570 655-4610
 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
 _____ DAY OF _____ 20____

 SIGNATURE

MY COMMISSION EXPIRES _____ MO. DAY YR.

 SIGNATURE OF CANDIDATE

 PRINTED NAME

 AREA CODE DAYTIME TELEPHONE NUMBER

COMMONWEALTH OF PENNSYLVANIA
 Notarial Seal
 Evelyn P. DelProra, Notary Public
 City Of Pittston, Luzerne County
 My Commission Expires Sept. 10, 2010
 Member, Pennsylvania Association of Notaries