

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	57		REPORT FILED ON BEHALF OF	CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST		
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST Friends of Mary								
STREET ADDRESS 28 West Hollenback Ave.								
CITY Wilkes-Barre			STATE PA	ZIP CODE 18702				
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY		DATE OF ELECTION		
	Recorder of Deeds			Rep		MO. DAY YEAR 11 4 2003		
6TH TUESDAY PRE-PRIMARY	1	DATES OF REPORTING PERIOD		FOR OFFICE USE ONLY				
2ND FRIDAY PRE-PRIMARY	2	NO. DAY YEAR 1 1 06	TO	NO. DAY YEAR 12 31 06				
30 DAY POST-PRIMARY	3	CASH BALANCE AT END OF REPORTING PERIOD:		\$ 0				
6TH TUESDAY PRE-ELECTION	4	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:		\$ 0				
2ND FRIDAY PRE-ELECTION	5	AMENDMENT REPORT?		YES			NO	<input checked="" type="checkbox"/>
30 DAY POST-ELECTION	6	TERMINATION REPORT?		YES			NO	<input checked="" type="checkbox"/>
ANNUAL REPORT	<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.

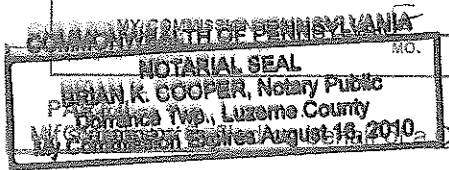
SWORN TO AND SUBSCRIBED BEFORE ME THIS  
 29 DAY OF January 2007

*Brian K Cooper* Notary  
 SIGNATURE ID# 1225225

*Keith Mauls*  
 SIGNATURE OF PERSON SUBMITTING REPORT  
 PRINTED NAME

570 829-2641  
 AREA CODE DAYTIME TELEPHONE NUMBER

16 2010  
 DAY YR.



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  
 29 DAY OF January 2007

*Brian K Cooper* Notary  
 SIGNATURE ID# 1225225

*Mary K. Dyleski*  
 SIGNATURE OF CANDIDATE  
 PRINTED NAME

570 825-1641  
 AREA CODE DAYTIME TELEPHONE NUMBER

8 16 2010  
 DAY YR.

