

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: <u>232-75-5521</u>	Report Filed By: <u>CANDIDATE</u> 1. <u>COMMITTEE</u> 2. <u>LOBBYIST</u> 3.
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Name of Filing Committee, Candidate or Lobbyist: Mountaintop Regional Committee

Street Address: 90 561 Mungolan Rd

City: Mountaintop State: Pa. Zip Code: 18707 - 9505

TYPE OF REPORT (place X to the right of report type)	4TH TUESDAY PRE-PRIMARY 1.	2ND FRIDAY PRE-PRIMARY 2.	30 DAY POST PRIMARY 3. <input checked="" type="checkbox"/>	AMENDMENT REPORT? YES <input type="checkbox"/> NO <input type="checkbox"/>
	8TH TUESDAY PRE-ELECTION 4.	2ND FRIDAY PRE-ELECTION 5.	30 DAY POST ELECTION 6.	TERMINATION REPORT? YES <input type="checkbox"/> NO <input type="checkbox"/>
	ANNUAL REPORT 7.	YEAR <u>2005</u>	FILING METHOD <input checked="" type="checkbox"/> CHECK ONE <input type="checkbox"/> PAPER <input checked="" type="checkbox"/> DISKETTE	

Name of Office Sought by Candidate:	DATE OF ELECTION MO. DAY YEAR <u>11 08 2005</u>	District Number <u>2nd Abington</u>	Office Code <u>7ch</u>	Party Code <u>Dem</u>	County Code <u>40</u>
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(SEE INSTRUCTIONS FOR CODES)

Summary of Receipts and Expenditures from:	MO. DAY YEAR <u>5 03 2005</u>	To	MO. DAY YEAR <u>6 02 2005</u>	FOR OFFICE USE ONLY BOARD OF ELECTIONS BERKSHIRE COUNTY, PA. RECEIVED JUN - 6 AM 10:49
	A. Amount Brought Forward From Last Report	\$	<u>1,697.81</u>	
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	<u>0-</u>		
C. Total Funds Available (Sum of Lines A and B)	\$	<u>1,697.81</u>		
D. Total Expenditures (From Schedule III)	\$	<u>58.54</u>		
E. Ending Cash Balance (Subtract Line D from Line C)	\$	<u>1,639.27</u>		
F. Value of In-Kind Contributions Received (From Schedule II)	\$	<u>0-</u>		
G. Unpaid Debts and Obligations (From Schedule IV)	\$	<u>0-</u>		

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 3RD day of JUNE 2005

Richard L. Dado Signature Notarial Seal
Richard L. Dado, Notary Public
Fairview Twp., Luzerne County
My Commission Expires Oct. 15, 2005

Joan Pigeck Signature of Person Submitting Report
Printed Name
570 Area Code 474-5366 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

**SCHEDULE III
STATEMENT OF EXPENDITURES**

Name of Filing Committee or Candidate <i>Mt Top Regional Committee</i>	Reporting Period From <i>05-03-05</i> To <i>06-02-05</i>
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To Whom Paid <i>Januzzi</i>	MO. <i>05</i>	DAY <i>31</i>	YEAR <i>05</i>	Amount \$ <i>5854</i>
Mailing Address <i>RT 309</i>				
Description of Expenditure <i>Post election meeting</i>				
City <i>Mt Top</i>	State <i>Pa</i>	Zip Code (Plus 4) <i>18707-</i>		

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.

PAGE TOTAL
\$ <i>58.54</i>