

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.)

Filer Identification Number: <u>232-75-5521</u>		Report Filed By: <input type="checkbox"/> CANDIDATE <input checked="" type="checkbox"/> COMMITTEE <input type="checkbox"/> LOBBYIST								
Name of Filing Committee, Candidate or Lobbyist: <u>Mountaintop Regional Democratic Committee</u>										
Street Address: <u>10 561 Kuangala Rd</u>										
City: <u>Mountaintop</u>		State: <u>Pa.</u>	Zip Code: <u>18707-9505</u>							
TYPE OF REPORT (place X to the right of report type)	4TH TUESDAY PRE-PRIMARY	1. <input type="checkbox"/>	2ND FRIDAY PRE-PRIMARY	2. <input type="checkbox"/>	30 DAY POST-PRIMARY	3. <input type="checkbox"/>	AMENDMENT REPORT?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4. <input type="checkbox"/>	2ND FRIDAY PRE-ELECTION	5. <input type="checkbox"/>	30 DAY POST-ELECTION	6. <input type="checkbox"/>	TERMINATION REPORT?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
	ANNUAL REPORT	7. <input checked="" type="checkbox"/>	YEAR <u>2008</u>	FILING METHOD <input checked="" type="checkbox"/> CHECK ONE <input type="checkbox"/> PAPER <input type="checkbox"/>		DISKETTE <input checked="" type="checkbox"/>				
Name of Office Sought by Candidate:				DATE OF ELECTION		District Number	Office Code	Party Code	County Code	
				MO.	DAY	YEAR				
				<u>11</u>	<u>04</u>	<u>08</u>				
							(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:			MO.	DAY	YEAR	FOR OFFICE USE ONLY				
			<u>01</u>	<u>01</u>	<u>2008</u>	To	<u>12</u>	<u>31</u>	<u>2008</u>	RECEIVED 2009 JAN 20 AM 9:31 BOARD OF ELECTIONS LUZERNE COUNTY, PA.
A. Amount Brought Forward From Last Report		\$	<u>970.83</u>							
B. Total Monetary Contributions and Receipts (From Schedule I)		\$	<u>— 0 —</u>							
C. Total Funds Available (Sum of Lines A and B)		\$	<u>970.83</u>							
D. Total Expenditures (From Schedule III)		\$	<u>66.50</u>							
E. Ending Cash Balance (Subtract Line D from Line C)		\$	<u>904.33</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 ~~COMMONWEALTH OF PENNSYLVANIA~~ **COMMONWEALTH OF PENNSYLVANIA** records, or data on computer diskette, are to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this 12th day of January

Notarial Seal
 Michele A. Maczuga, Notary Public
 Wright Twp., Luzerne County
 My Commission Expires Dec. 3, 2012
 Member, Pennsylvania Association of Notaries

Signature of Person Submitting Report: Joan Pipeck
 Printed Name: JOAN PIPECK
 Area Code: (570) Daytime Telephone Number: 474-5366

My commission expires 12 12 2012
 MO. DAY YR.

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 _____
 Printed Name _____
 Area Code _____ Daytime Telephone Number _____

My commission expires _____ MO. DAY YR.

