

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:	Report Filed By:	CANDIDATE ^{1.}	COMMITTEE ^{2.} <input checked="" type="checkbox"/>	LOBBYIST ^{3.}
Name of Filing Committee, Candidate or Lobbyist: Plains Township Democrat Organization				
Street Address: c/o Plains American Legion, 99-101 E. Carey Street				
City: Plains		State: PA	Zip Code: 18705 -	

TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY ^{1.}	2ND FRIDAY PRE-PRIMARY ^{2.}	30 DAY POST PRIMARY ^{3.}	AMENDMENT REPORT? YES	NO
	9TH TUESDAY PRE-ELECTION ^{4.}	2ND FRIDAY PRE-ELECTION ^{5.}	30 DAY POST ELECTION ^{6.}	TERMINATION REPORT? YES	NO
	ANNUAL REPORT ^{7.} <input checked="" type="checkbox"/>	YEAR 2008	FILING METHOD (✓) CHECK ONE	PAPER <input checked="" type="checkbox"/>	DISKETTE

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

(SEE INSTRUCTIONS FOR CODES)

Summary of Receipts and Expenditures from:	MO. DAY YEAR	To	MO. DAY YEAR	FOR OFFICE USE ONLY
	1 1 2008		12 31 2008	
A. Amount Brought Forward From Last Report	\$ 1802.39			RECEIVED 2009 JAN 22 PM 12: BOARD OF ELECTIONS LUZERNE COUNTY, PA
B. Total Monetary Contributions and Receipts (From Schedule I)	\$ 0			
C. Total Funds Available (Sum of Lines A and B)	\$ 1802.39			
D. Total Expenditures (From Schedule III)	\$ 0			
E. Ending Cash Balance (Subtract Line D from Line C)	\$ 1802.39			
F. Value of In-Kind Contributions Received (From Schedule II)	\$ -			
G. Unpaid Debts and Obligations (From Schedule IV)	\$ 0			

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

21 day of January 2009

Signature of Person Submitting Report: Robert M. Savakow

Printed Name: Robert M. Savakow

Area Code: 570 Daytime Telephone Number: 885-1384

Notary Public: NOELLE SHEPHERD, Luzerne County, PA. My commission expires March 2012.

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 _____ 19____

Signature of Candidate: _____

Printed Name: _____

Area Code: _____ Daytime Telephone Number: _____