

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 <sup>1.</sup>	COMMITTEE <sup>2.</sup> <input checked="" type="checkbox"/>	LOBBYIST <sup>3.</sup>	
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST COMMITTEE TO ELECT BRUCE J. REILLY						
STREET ADDRESS 143 POPLAR ST.						
CITY WIKES-BARRE			STATE PA	ZIP CODE 18702 -		
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION	
	MEMBER OF COUNCIL WIKES-BARRE B			DEM	MO.	DAY YEAR
6TH TUESDAY PRE-PRIMARY	1.	DATES OF REPORTING PERIOD		FOR OFFICE USE ONLY		
2ND FRIDAY PRE-PRIMARY	2.	MO. DAY YEAR	TO	MO. DAY YEAR		
30 DAY POST-PRIMARY	3.	1 1 2008		12 31 2008		
6TH TUESDAY PRE-ELECTION	4.	CASH BALANCE AT END OF REPORTING PERIOD: \$ 25.39				RECEIVED 2009 JAN 30 AM 11:35 BOARD OF ELECTIONS LUZERNE COUNTY, PA.
2ND FRIDAY PRE-ELECTION	5.	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ 538.25				
30 DAY POST-ELECTION	6.	AMENDMENT REPORT? YES NO <input checked="" type="checkbox"/>				
ANNUAL REPORT	7. <input checked="" type="checkbox"/>	TERMINATION REPORT? YES NO <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

30<sup>th</sup> DAY OF JANUARY 20 09

COMMONWEALTH OF PENNSYLVANIA  
 NOTARY PUBLIC

MARGARET M. SHARKSNAS, NOTARY PUBLIC  
 WILKES-BARRE CITY, LUZERNE COUNTY  
 MY COMMISSION EXPIRES DEC 26, 2010

SIGNATURE OF PERSON SUBMITTING REPORT

PAULETTE D. REILLY  
 PRINTED NAME

570  
 AREA CODE

829-0846  
 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

30<sup>th</sup> DAY OF JANUARY 20 09

Margaret M. Sharksnas  
 SIGNATURE

MY COMMISSION EXPIRES 12-26-2010  
 MO. DAY YR.

SIGNATURE OF CANDIDATE

Bruce J. Reilly  
 PRINTED NAME

570  
 AREA CODE

829-0846  
 DAYTIME TELEPHONE NUMBER

COMMONWEALTH OF PENNSYLVANIA

NOTARY PUBLIC  
 MARGARET M. SHARKSNAS, NOTARY PUBLIC  
 WILKES-BARRE CITY, LUZERNE COUNTY  
 MY COMMISSION EXPIRES DEC 26, 2010

Department of State • Bureau of Commissions, Elections and Legislation  
 303 North Office Building • Harrisburg, PA 17120-0029 • (717) 787-5280