

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: <input type="checkbox"/>		Report Filed By: <input type="checkbox"/>		CANDIDATE ^{1.} <input type="checkbox"/>	COMMITTEE ^{2.} <input checked="" type="checkbox"/>	LOBBYIST ^{3.} <input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF SEAN SHAMANY						
Street Address: PO Box 182						
City: HAZLETON			State: PA		Zip Code: 18201 -	
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 <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION ^{4.}	2ND FRIDAY PRE-ELECTION ^{5.}	30 DAY POST ELECTION ^{6.} <input checked="" type="checkbox"/>	TERMINATION REPORT?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
	ANNUAL REPORT ^{7.}	YEAR <input type="checkbox"/> 2005		FILING METHOD (CHECK ONE) <input type="checkbox"/>	PAPER <input checked="" type="checkbox"/>	DISKETTE <input type="checkbox"/>

Name of Office Sought by Candidate: HAZLETON AREA SCHOOL BOARD			DATE OF ELECTION			District Number	Office Code	Party Code	County Code
MO.	DAY	YEAR	MO.	DAY	YEAR	116	07H	REP	40
11	08	2005				(SEE INSTRUCTIONS FOR CODES)			

Summary of Receipts and Expenditures from:	MO.	DAY	YEAR	To	MO.	DAY	YEAR
		10	25		2005		11
A. Amount Brought Forward From Last Report				\$	1402.75		
B. Total Monetary Contributions and Receipts (From Schedule I)				\$	1400.23		
C. Total Funds Available (Sum of Lines A and B)				\$	2802.98		
D. Total Expenditures (From Schedule III)				\$	2350.15		
E. Ending Cash Balance (Subtract Line D from Line C)				\$	452.83		
F. Value of In-Kind Contributions Received (From Schedule II)				\$	0		
G. Unpaid Debts and Obligations (From Schedule IV)				\$	2700.00		

FOR OFFICE USE ONLY

RECEIVED
 2005 DEC -9 PM 3:40
 BOARD OF ELECTIONS
 LUZERNE COUNTY, PA.

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

8 day of December 2005

Linda L. Wilson
 Signature
 NOTARIAL SEAL
 LINDA L. WILSON, Notary Public
 City of Wilkes Barre, Luzerne County
 My Commission Expires August 25, 2007

MO. DAY YR.

Daniel Rodgers
 Signature of Person Submitting Report

DANIEL RODGERS
 Printed Name

570 **233-1516**
 Area Code 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

8 day of December 2005

Linda L. Wilson
 Signature
 NOTARIAL SEAL
 LINDA L. WILSON, Notary Public
 City of Wilkes Barre, Luzerne County
 My Commission Expires August 25, 2007

DAY YR.

Sean P. Shamany
 Signature of Candidate

SEAN P. SHAMANY
 Printed Name

570 **454-7009**
 Area Code Daytime Telephone Number

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate FRIENDS OF SEAN SHAMANY	Reporting Period From 10/25/05 To 11/28/05
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ 50.00

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	\$ Ø
All Other Contributions (Part B)	\$ 1350.00
TOTAL for the Reporting Period (2)	\$ 1350.00

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ Ø
All Other Contributions (Part D)	\$ Ø
TOTAL for the Reporting Period (3)	\$ Ø

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)	
TOTAL for the Reporting Period (4)	\$ 0.23

TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)	\$ 1400.23
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PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate FRIENDS OF SEAN SHAMANY	Reporting Period From 10/24/05 To 11/28/05
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Full Name of Contributing Committee	DATE			AMOUNT
	MO.	DAY	YEAR	
M/M JEROME PALKO	10	28	05	\$ 100.00
Mailing Address 2169 CRISTMILL DRIVE	MO.	DAY	YEAR	\$
City WEATHERLY	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 18255 -	MO.	DAY	YEAR	\$
M/M BRUCE SLOSSER	10	28	05	\$ 100.00
Mailing Address 99 PARK AVE	MO.	DAY	YEAR	\$
City WEST HAZLETON	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 18201 -	MO.	DAY	YEAR	\$
LOUIS N. PANTAGES	10	28	05	\$ 100.00
Mailing Address 132 S. LAUREL ST	MO.	DAY	YEAR	\$
City HAZLETON	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 18201 -	MO.	DAY	YEAR	\$
MICHAEL DECOSMO	10	28	05	\$ 100.00
Mailing Address 1201 N. CHURCH ST STE 215	MO.	DAY	YEAR	\$
City HAZLETON	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 18202 -	MO.	DAY	YEAR	\$
ANTONY R. GRIGUOLI DC	10	28	05	\$ 150.00
Mailing Address 600 MCKINLEY ST	MO.	DAY	YEAR	\$
City HAZLETON	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 18201 -	MO.	DAY	YEAR	\$
HUGH J. SHAMANY	10	28	05	\$ 200.00
Mailing Address Box 22 NEW COXEVILLE	MO.	DAY	YEAR	\$
City BEAVER MEADOWS	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 18216 -	MO.	DAY	YEAR	\$
TRACY GALLAGHER	10	28	05	\$ 250.00
Mailing Address 175 ALVIN ST	MO.	DAY	YEAR	\$
City FREELAND	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 18224 -	MO.	DAY	YEAR	\$
LAURA A. CORAZZA	11	06	05	\$ 200.00
Mailing Address PO BOX 212	MO.	DAY	YEAR	\$
City CONYNGHAM	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 18219 -	MO.	DAY	YEAR	\$

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL \$ 1200.00

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate FRIENDS OF SEAN SHAMANY	Reporting Period From 10/24/05 To 11/28/05
---	---

Full Name of Contributing Committee	DATE			AMOUNT
	MO.	DAY	YEAR	
BERNADETTE E. SLUSSER	11	06	05	\$ 150.00
Mailing Address 636 RIDGE AVENUE	MO.	DAY	YEAR	\$
City WEST HAZLETON State PA Zip Code (Plus 4) 18202-	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL \$ 150.00

ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part A.)

Name of Filing Committee or Candidate FRIENDS OF SEAN SHAMANY	Reporting Period From 10/25/05 To 11/28/05
---	---

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)				\$

PAGE TOTAL
\$ 0

Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.

PART C

**CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES
OVER \$250.00**

Use this Part to itemize only contributions received from political committees with an aggregate value over \$250.00 in the reporting period.

Name of Filing Committee or Candidate FRIENDS OF SEAN SHAMANY	Reporting Period From 10/25/05 To 11/28/05
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Full Name of Contributing Committee	DATE			AMOUNT
	MO.	DAY	YEAR	
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)				\$

PAGE TOTAL
\$ 0

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PART D
ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of
over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate FRIENDS OF SEAN SHAMANY	Reporting Period From 10/25/05 To 11/28/05
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				DATE			AMOUNT
				MO.	DAY	YEAR	
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							

Enter Grand Total of Part D on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 0

PART E
OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate FRIENDS OF SEAN SHAMANY	Reporting Period From 10/25/05 To 11/28/05
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Full Name KNBT

Mailing Address PO BOX 25012
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City LEHIGH VALLEY	State PA	Zip Code (Plus 4) 18002-	MO. 11	DAY 03	YEAR 05	Amount \$ 0.23
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Receipt Description INTEREST
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Full Name

Mailing Address

City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		-				\$

Receipt Description

Full Name

Mailing Address

City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		-				\$

Receipt Description

Full Name

Mailing Address

City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		-				\$

Receipt Description

Full Name

Mailing Address

City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		-				\$

Receipt Description

Full Name

Mailing Address

City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		-				\$

Receipt Description

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL \$ 0.23

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate FRIENDS OF SEAN SHAMANY	Reporting Period From 10/25/05 To 11/28/05
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1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR

TOTAL for the Reporting Period	(1)	\$	\emptyset
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2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)

TOTAL for the Reporting Period	(2)	\$	\emptyset
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3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)

TOTAL for the Reporting Period	(3)	\$	\emptyset
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TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F.)		\$	\emptyset
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SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate FRIENDS OF SEAN SHAMANY	Reporting Period From 10/25/05 To 11/28/05
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Description of Contribution:				

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Description of Contribution:				

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Description of Contribution:				

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Description of Contribution:				

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Description of Contribution:				

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Description of Contribution:				

Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.

PAGE TOTAL
\$ 0

SCHEDULE II
PART G

IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate FRIENDS OF SEAN SHAMANY	Reporting Period From 10/25/05 To 11/28/05
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				DATE			AMOUNT
				MO.	DAY	YEAR	
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.

PAGE TOTAL \$ 0

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate FRIENDS OF SEAN SHAMANY	Reporting Period From 10/25/05 To 11/28/05
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To Whom Paid	MO.	DAY	YEAR	Amount	Description of Expenditure
COMMITTEE TO RE-ELECT RONGATSKI E. CHESTNUT ST HAZLETON PA 18201-	10	27	05	\$ 100.00	DONATION
STANDARD SPEAKER WYOMING ST HAZLETON PA 18201-	10	31	05	\$ 1650.60	ADVERTISING
BILL RESHETAR PHOTO 39 N. LAUREL ST HAZLETON PA 18201-	11	1	05	\$ 53.00	PHOTO SHOOT
STAPLES 180 SUSQUEHANNA BLVD HAZLETON PA 18201-	11	3	05	\$ 137.55	COPIES / SUPPLIES
CUSAT'S CAFE 741 ALTER ST HAZLETON PA 18201-	11	7	05	\$ 182.00	PRE-ELECTION PARTY
CUSAT'S CAFE 741 ALTER ST HAZLETON PA 18201-	11	8	05	\$ 76.00	ELECTION DAY FOOD
STANDARD SPEAKER WYOMING ST HAZLETON PA 18201-	11	15	05	\$ 144.00	THANK YOU AD
KNBT PO BOX 25012 LEHIGH VALLEY PA 18202-	11	03	05	\$ 7.00	SERVICE CHARGE

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL
\$ 2350.15

SCHEDULE IV STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period.

Name of Filing Committee or Candidate FRIENDS OF SEAN SHAMANY	Reporting Period From 10/25/05 To 11/28/05
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Name of Creditor SEAN P. SHAMANY				Outstanding Balance of Debt \$ 1200.00	
Mailing Address 1042 LIBERTY AVE	DATE DEBT INCURRED	MO. 02	DAY 12	YEAR 04	
City HAZLETON	State PA	Zip Code (Plus 4) 18202			
Description of Debt LOAN TO CAMPAIGN					

Name of Creditor SEAN P. SHAMANY				Outstanding Balance of Debt \$ 300.00	
Mailing Address 1042 LIBERTY AVE	DATE DEBT INCURRED	MO. 02	DAY 20	YEAR 04	
City HAZLETON	State PA	Zip Code (Plus 4) 18202			
Description of Debt LOAN TO CAMPAIGN					

Name of Creditor SEAN P. SHAMANY				Outstanding Balance of Debt \$ 1200.00	
Mailing Address 1042 LIBERTY AVE	DATE DEBT INCURRED	MO. 11	DAY 08	YEAR 04	
City HAZLETON	State PA	Zip Code (Plus 4) 18202			
Description of Debt					

Name of Creditor				Outstanding Balance of Debt \$	
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR	
City	State	Zip Code (Plus 4)			
Description of Debt					

Name of Creditor				Outstanding Balance of Debt \$	
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR	
City	State	Zip Code (Plus 4)			
Description of Debt					

Name of Creditor				Outstanding Balance of Debt \$	
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR	
City	State	Zip Code (Plus 4)			
Description of Debt					

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.

PAGE TOTAL \$ 2700.00
