

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 ^{1.}	COMMITTEE ^{2.} <input checked="" type="checkbox"/>	LOBBYIST ^{3.}
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST Fourth District Republican Committee					
STREET ADDRESS 1015 Aspen Drive					
CITY Mount Airy			STATE Pa	ZIP CODE 18707 -	
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY
6TH TUESDAY PRE-PRIMARY ^{1.}		all Rep ^l Offices		04	R
2ND FRIDAY PRE-PRIMARY ^{2.}		DATES OF REPORTING PERIOD		DATE OF ELECTION	
30 DAY POST-PRIMARY ^{3.}		MO. DAY YEAR		MO.	DAY YEAR
6TH TUESDAY PRE-ELECTION ^{4.}		5 3 11		6	6 11
2ND FRIDAY PRE-ELECTION ^{5.}		TO		FOR OFFICE USE ONLY	
30 DAY POST-ELECTION ^{6.}		CASH BALANCE AT END OF REPORTING PERIOD:		\$ 808.80	
ANNUAL REPORT ^{7.}		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:		\$ —	
		AMENDMENT REPORT?		YES	NO <input checked="" type="checkbox"/>
		TERMINATION REPORT?		YES	NO <input checked="" type="checkbox"/>

RECEIVED
 2011 JUN 16 PM 1:29
 BOARD OF ELECTIONS
 LUZERNE COUNTY, PA.

AFFIDAVIT SECTION

ART I -
 statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.
 statement is filed on behalf of a Candidate, the Candidate must sign here.
 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

16th DAY OF June 2011

Sharon A. Bat
 SIGNATURE

MY COMMISSION EXPIRES 1-25-2015
 MO. DAY YR.

Holly M Cirko
 SIGNATURE OF PERSON SUBMITTING REPORT

Holly M Cirko
 PRINTED NAME

570 8685055
 AREA CODE 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

DAY OF 20

SIGNATURE

MY COMMISSION EXPIRES MO. DAY YR.

SIGNATURE OF CANDIDATE

PRINTED NAME

AREA CODE DAYTIME TELEPHONE NUMBER

COMMONWEALTH OF PENNSYLVANIA
 NOTARIAL SEAL
 SHARON A. BAT, Notary Public
 City of Wilkes-Barre, Luzerne County
 My Commission Expires January 25, 2015