

# 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: <span style="float:right">▶</span>		Report Filed By: <span style="float:right">▶</span>		CANDIDATE <sup>1.</sup>		COMMITTEE <sup>2.</sup> <input checked="" type="checkbox"/>		LOBBYIST <sup>3.</sup>			
Name of Filing Committee, Candidate or Lobbyist: <b>THE COMMITTEE TO ELECT ELIZABETH (LIZ) MARTIN</b>											
Street Address: <b>450 LAKE CATALPA ROAD</b>											
City: <b>DALLAS</b>					State: <b>PA</b>		Zip Code: <b>18612 -</b>				
TYPE OF REPORT  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY <sup>1.</sup>		2ND FRIDAY PRE-PRIMARY <sup>2.</sup>		30 DAY POST-PRIMARY <sup>3.</sup>		AMENDMENT REPORT? YES <input type="checkbox"/> NO <input type="checkbox"/>				
	6TH TUESDAY PRE-ELECTION <sup>4.</sup>		2ND FRIDAY PRE-ELECTION <sup>5.</sup>		30 DAY POST-ELECTION <sup>6.</sup>		TERMINATION REPORT? YES <input type="checkbox"/> NO <input type="checkbox"/>				
	ANNUAL REPORT <sup>7.</sup>		YEAR <b>2011</b>		FILING METHOD ( ) CHECK ONE <span style="float:right">▶</span>		PAPER <input checked="" type="checkbox"/> DISKETTE <input type="checkbox"/>				
Name of Office Sought by Candidate: <b>DALLAS TWP. SUPERVISOR</b>					DATE OF ELECTION		District Number	Office Code	Party Code	County Code	
					MO. DAY YEAR <b>11 08 11</b>		<b>0TH</b>	<b>DEM</b>	<b>40</b>	(SEE INSTRUCTIONS FOR CODES)	
Summary of Receipts and Expenditures from: <span style="float:right">▶</span>			MO. DAY YEAR <b>5 3 2011</b>			MO. DAY YEAR <b>6 6 2011</b>			FOR OFFICE USE ONLY  RECEIVED 2011 JUN 14 AM 9:03 BOARD OF ELECTIONS LUZERNE COUNTY, PA.		
			A. Amount Brought Forward From Last Report			\$ <b>3087.33</b>					
B. Total Monetary Contributions and Receipts (From Schedule I)			\$ <b>0.</b>								
C. Total Funds Available (Sum of Lines A and B)			\$ <b>3087.33</b>								
D. Total Expenditures (From Schedule III)			\$ <b>608.72</b>								
E. Ending Cash Balance (Subtract Line D from Line C)			\$ <b>2478.61</b>								
F. Value of In-Kind Contributions Received (From Schedule II)			\$ <b>30.00</b>								
G. Unpaid Debts and Obligations (From Schedule IV)			\$ <b>1100.00</b>								

### 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

<p><b>COMMONWEALTH OF PENNSYLVANIA</b> 20 <b>11</b></p> <p><b>NOTARIAL SEAL</b></p> <p><b>FREDERICK HOCKENBURY, NOTARY PUBLIC</b></p> <p><b>DALLAS TWP., LUZERNE COUNTY</b></p> <p>My commission expires <b>MAY 22, 2015</b> YR.</p>	<p><i>Diane Dreier</i></p> <p>Signature of Person Submitting Report</p> <p><b>DIANE DREIER</b></p> <p>Printed Name</p> <p><b>570</b> <b>574-5465</b></p> <p>Area Code Daytime Telephone Number</p>
--	--

**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

<p><b>COMMONWEALTH OF PENNSYLVANIA</b> 20 <b>11</b></p> <p>day of <b>NOTARIAL SEAL</b></p> <p><b>FREDERICK HOCKENBURY, NOTARY PUBLIC</b></p> <p><b>DALLAS TWP., LUZERNE COUNTY</b></p> <p>My commission expires <b>MAY 22, 2015</b> YR.</p>	<p><i>Elizabeth A. Martin</i></p> <p>Signature of Candidate</p> <p><b>Elizabeth A. Martin</b></p> <p>Printed Name</p> <p><b>570</b> <b>362-2890</b></p> <p>Area Code Daytime Telephone Number</p>
---	---

# 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 <b>COMMITTEE TO ELECT ELIZABETH (LIZ) MARTIN</b>	Reporting Period From <b>5/3/11</b> To <b>6/6/11</b>
---	---

<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>		
TOTAL for the Reporting Period	(1)	\$ <b>30.00</b>

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

<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>		
TOTAL for the Reporting Period	(3)	\$

<b>TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD</b> (Add and enter amount totals from Boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F.)	<b>\$ 30.00</b>
---	-----------------

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate <b>COMMITTEE TO ELECT ELIZABETH (LIZ) MARTIN</b>	Reporting Period From <u>5/3/11</u> To <u>6/6/11</u>
---	---

To Whom Paid <b>BUTTON STAR</b>	MO. <b>05</b>	DAY <b>04</b>	YEAR <b>11</b>	Amount <b>\$ 106.38</b>
Mailing Address <b>1935 N. RIDGE ROAD</b>		Description of Expenditure <b>CAMPAIGN BUTTONS</b>		
City <b>WICHITA</b>	State <b>KS</b>	Zip Code (Plus 4) <b>67212 -</b>		
To Whom Paid <b>FAST SIGNS</b>	MO. <b>05</b>	DAY <b>11</b>	YEAR <b>11</b>	Amount <b>\$ 178.24</b>
Mailing Address <b>763 KIDDER ST.</b>		Description of Expenditure <b>CAMPAIGN BANNER</b>		
City <b>W-B</b>	State <b>PA</b>	Zip Code (Plus 4) <b>18702 -</b>		
To Whom Paid <b>DALLAS POST</b>	MO. <b>05</b>	DAY <b>16</b>	YEAR <b>11</b>	Amount <b>\$ 320.10</b>
Mailing Address <b>15 N. MAIN ST</b>		Description of Expenditure <b>AD IN 5/15 DALLAS POST</b>		
City <b>DALLAS</b>	State <b>PA</b>	Zip Code (Plus 4) <b>18612 -</b>		
To Whom Paid <b>CITIZENS BANK</b>	MO. <b>5</b>	DAY <b>24</b>	YEAR <b>11</b>	Amount <b>\$ 4.00</b>
Mailing Address		Description of Expenditure <b>CHECKING ACCOUNT SERVICE CHARGE</b>		
City	State	Zip Code (Plus 4) <b>-</b>		
To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4) <b>-</b>		
To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4) <b>-</b>		
To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4) <b>-</b>		
To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4) <b>-</b>		

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

PAGE TOTAL  
**\$ 608.72**

**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 <b>ELIZABETH MARTIN</b>	Reporting Period From <b>5/3/11</b> to <b>6/6/11</b>
--	---

Name of Creditor <b>ELIZABETH A. MARTIN</b>				Outstanding Balance of Debt <b>\$ 1100. —</b>	
Mailing Address <b>450 LAKE CATALPA ROAD</b>		DATE DEBT INCURRED <b>6/22/09</b>	MO. <b>06</b>	DAY <b>22</b>	YEAR <b>09</b>
City <b>DALLAS</b>		State <b>PA</b>	Zip Code (Plus 4) <b>18612-</b>		
Description of Debt <b>LOAN TO COMMITTEE</b>					

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

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

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

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

Name of Creditor				Outstanding Balance of Debt <b>\$</b>	
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  
**\$ 1100. —**