

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: <u>LUZERNE CO. 5th DISTRICT DEMOCRATIC COMMITTEE</u>											
Street Address: <u>21 9th St / POB 4211 Wyoming</u>											
City: <u>WYOMING</u>				State: <u>PA</u>		Zip Code: <u>18644-</u>					
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 checked="" type="checkbox"/> NO <input type="checkbox"/>				
	6TH TUESDAY PRE-ELECTION ^{4.}		2ND FRIDAY PRE-ELECTION ^{5.}		30 DAY POST ELECTION ^{6.}		TERMINATION REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>				
	ANNUAL REPORT <input checked="" type="checkbox"/>		YEAR <u>2010</u>		FILING METHOD <input checked="" type="checkbox"/> CHECK ONE		PAPER <input checked="" type="checkbox"/> DISKETTE <input type="checkbox"/>				
Name of Office Sought by Candidate:					DATE OF ELECTION			District Number	Office Code	Party Code	County Code
					MO.	DAY	YEAR				
					11	2	2010				
(SEE INSTRUCTIONS FOR CODES)											
Summary of Receipts and Expenditures from:			MO. DAY YEAR			MO. DAY YEAR			FOR OFFICE USE ONLY		
			11 23 2010			To 12 31 2010					
A. Amount Brought Forward From Last Report				\$ <u>6384.68</u>							
B. Total Monetary Contributions and Receipts (From Schedule I)				\$ <u>300.-</u>							
C. Total Funds Available (Sum of Lines A and B)				\$ <u>6684.68</u>							
D. Total Expenditures (From Schedule III)				\$ <u>0</u>							
E. Ending Cash Balance (Subtract Line D from Line C)				\$ <u>6684.68</u>							
F. Value of In-Kind Contributions Received (From Schedule II)				\$ <u>0</u>							
G. Unpaid Debts and Obligations (From Schedule IV)				\$ <u>0</u>							

RECEIVED
 2011 JAN 20 PM 12:25
 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
20th day of February 19 11
 Gary J. Loughney, Notary Public
 Jenkins Twp., Luzerne County
 My Commission Expires Oct. 21, 2014
 Member, Pennsylvania Association of Notaries
 My commission expires 10-21-14
 MO. DAY YR.

John Gilligan
 Signature of Person Submitting Report
JOHN GILLIGAN
 Printed Name
570 693-4597
 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
 _____ day of _____ 19 _____

 Signature
 My commission expires _____
 MO. DAY YR.

 Signature of Candidate

 Printed Name

 Area Code Daytime Telephone Number

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate <i>5th District Democratic Comm.</i>	Reporting Period From <i>11-23-10</i> To <i>12-31-10</i>
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ <i>0</i>

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	\$ <i>0</i>
All Other Contributions (Part B)	\$ <i>0</i>
TOTAL for the Reporting Period (2)	\$ <i>0</i>

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ <i>300-</i>
All Other Contributions (Part D)	\$ <i>0</i>
TOTAL for the Reporting Period (3)	\$ <i>300-</i>

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)	
TOTAL for the Reporting Period (4)	\$ <i>0</i>

TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD <i>(Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)</i>	\$ <i>300-</i>
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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 <i>5th DISTRICT DEMOCRATIC COMMITTEES</i>	Reporting Period From <i>11-23-10</i> To <i>12-31-10</i>
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	DATE			AMOUNT
	MO.	DAY	YEAR	
Full Name of Contributing Committee <i>CITIZENS FOR JUSTICE</i>	<i>11</i>	<i>1</i>	<i>10</i>	<i>\$ 300 -</i>
Mailing Address	MO.	DAY	YEAR	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
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Mailing Address	MO.	DAY	YEAR	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	\$

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

PAGE TOTAL <i>\$ 300 -</i>
