

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 <sup>1.</sup>	COMMITTEE <sup>2.</sup> <input checked="" type="checkbox"/>	LOBBYIST <sup>3.</sup>				
Name of Filing Committee, Candidate or Lobbyist: <u>4th District Republican Committee</u>									
Street Address: <u>1015 Aspen Dr</u>									
City: <u>MT top</u>			State: <u>Pa</u>	Zip Code: <u>18707 -</u>					
TYPE OF REPORT  (place X to the right of report type)	8TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST PRIMARY	3.	AMENDMENT REPORT?	YES	NO
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5. <input checked="" type="checkbox"/>	30 DAY POST ELECTION	6.	TERMINATION REPORT?	YES	NO
	ANNUAL REPORT	7.	YEAR		FILING METHOD (✓) CHECK ONE		PAPER <input checked="" type="checkbox"/>	DISKETTE	

Name of Office Sought by Candidate: <u>all Republican Offices</u>	DATE OF ELECTION			District Number	Office Code	Party Code	County Code
	MO.	DAY	YEAR	<u>04</u>	<u>OTH</u>	<u>REP</u>	<u>40</u>
	<u>11</u>	<u>2</u>	<u>10</u>	(SEE INSTRUCTIONS FOR CODES)			

Summary of Receipts and Expenditures from:	MO.	DAY	YEAR	To	MO.	DAY	YEAR
	<u>9</u>	<u>14</u>	<u>10</u>		<u>10</u>	<u>18</u>	<u>10</u>
A. Amount Brought Forward From Last Report				\$	<u>546.57</u>		
B. Total Monetary Contributions and Receipts (From Schedule I)				\$	<u>600.00</u>		
C. Total Funds Available (Sum of Lines A and B)				\$	<u>1146.57</u>		
D. Total Expenditures (From Schedule III)				\$	<u>427.77</u>		
E. Ending Cash Balance (Subtract Line D from Line C)				\$	<u>718.80</u>		
F. Value of In-Kind Contributions Received (From Schedule II)				\$	<u>—</u>		
G. Unpaid Debts and Obligations (From Schedule IV)				\$	<u>—</u>		

**FOR OFFICE USE ONLY**

RECEIVED  
 OCT 22 AM 9:37  
 AND OF ELECTIONS  
 BERNE 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 21st day of October 19 2010

Mary Beth Chesler  
 Signature

Holly M Quinn  
 Signature of Person Submitting Report

Holly M Quinn  
 Printed Name

My commission expires May 31 2011  
 MO. DAY YR.

570 793 9101  
 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

\_\_\_\_\_  
 Signature of Candidate

\_\_\_\_\_  
 Printed Name

My commission expires \_\_\_\_\_ MO. DAY YR. \_\_\_\_\_ Area Code \_\_\_\_\_ Daytime Telephone Number

SCHEDULE I  
**CONTRIBUTIONS AND RECEIPTS**

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period From <u>9/14/10</u> To <u>10/18/10</u>
---------------------------------------	--

<b>1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR</b>		
	(1)	\$ <u>448</u>

<b>2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)</b>		
Contributions Received from Political Committees (Part A)		\$
All Other Contributions (Part B)		\$ <u>152.00</u>
TOTAL for the Reporting Period	(2)	\$

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

<b>4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)</b>		
	(4)	\$

<b>TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD</b> <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>		\$ <u>600.00</u>
---	--	------------------

**PART B**  
**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 <u>4th District Republican</u>	Reporting Period From <u>9-14-10</u> To <u>10-18-10</u>
---	--

Full Name of Contributor	DATE	AMOUNT
Ed Sieminski	10 8 10	\$ 152.00
Mailing Address <u>52 Brook Lane</u>	MO. DAY YEAR	\$
City <u>MT top Pa</u> State <u>Pa</u> Zip Code (Plus 4) <u>18707-</u>	MO. DAY YEAR	\$
Full Name of Contributor	MO. DAY YEAR	\$
Mailing Address	MO. DAY YEAR	\$
City State Zip Code (Plus 4)	MO. DAY YEAR	\$
Full Name of Contributor	MO. DAY YEAR	\$
Mailing Address	MO. DAY YEAR	\$
City State Zip Code (Plus 4)	MO. DAY YEAR	\$
Full Name of Contributor	MO. DAY YEAR	\$
Mailing Address	MO. DAY YEAR	\$
City State Zip Code (Plus 4)	MO. DAY YEAR	\$
Full Name of Contributor	MO. DAY YEAR	\$
Mailing Address	MO. DAY YEAR	\$
City State Zip Code (Plus 4)	MO. DAY YEAR	\$
Full Name of Contributor	MO. DAY YEAR	\$
Mailing Address	MO. DAY YEAR	\$
City State Zip Code (Plus 4)	MO. DAY YEAR	\$
Full Name of Contributor	MO. DAY YEAR	\$
Mailing Address	MO. DAY YEAR	\$
City State Zip Code (Plus 4)	MO. DAY YEAR	\$
Full Name of Contributor	MO. DAY YEAR	\$
Mailing Address	MO. DAY YEAR	\$
City State Zip Code (Plus 4)	MO. DAY YEAR	\$

PAGE TOTAL  
\$ 152.00

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

**SCHEDULE III  
STATEMENT OF EXPENDITURES**

Name of Filing Committee or Candidate	Reporting Period From _____ To _____
---------------------------------------	---

To Whom Paid <i>Kontkos Catering</i>	MO. <i>10</i>	DAY <i>8</i>	YEAR <i>10</i>	Amount \$ <i>360.00</i>
Mailing Address <i>741 S Prospect St</i>				
Description of Expenditure <i>Food for event</i>				
City <i>Nanticoke</i>	State <i>PA</i>	Zip Code (Plus 4) <i>18634-</i>		
To Whom Paid <i>Redners</i>	MO. <i>10</i>	DAY <i>8</i>	YEAR <i>10</i>	Amount \$ <i>21.10</i>
Mailing Address <i>Mark Plaza</i>				
Description of Expenditure <i>desserts for event</i>				
City <i>Edwardsville</i>	State <i>PA</i>	Zip Code (Plus 4) <i>18704</i>		
To Whom Paid <i>Weis Market</i>	MO. <i>10</i>	DAY <i>8</i>	YEAR <i>10</i>	Amount \$ <i>25.20</i>
Mailing Address <i>1 Weis Plaza</i>				
Description of Expenditure				
City <i>Nanticoke</i>	State <i>PA</i>	Zip Code (Plus 4) <i>18634-</i>		
To Whom Paid <i>Dollar General</i>	MO. <i>10</i>	DAY <i>8</i>	YEAR <i>10</i>	Amount \$ <i>21.47</i>
Mailing Address <i>800 Sun Spici Plaza</i>				
Description of Expenditure <i>plates &amp; napkins</i>				
City <i>Hanover Twp</i>	State <i>PA</i>	Zip Code (Plus 4) <i>18706-</i>		
To Whom Paid	MO.	DAY	YEAR	Amount \$
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4) -		
To Whom Paid	MO.	DAY	YEAR	Amount \$
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4) -		
To Whom Paid	MO.	DAY	YEAR	Amount \$
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4) -		
To Whom Paid	MO.	DAY	YEAR	Amount \$
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4) -		

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

PAGE TOTAL  
\$ *427.77*