

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 <input type="checkbox"/>	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST <input type="checkbox"/>							
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST COMMITTEE TO ELECT BRUCE KNICK												
STREET ADDRESS 2 SUNSET LANE												
CITY DUPONT		STATE PA	ZIP CODE 18041									
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION							
	PITTSBURGH AREA SCHOOL DIRECTOR		3RD	DEM	MO. 4	DAY 02	YEAR 2010					
6TH TUESDAY PRE-PRIMARY	1.	DATES OF REPORTING PERIOD		FOR OFFICE USE ONLY								
2ND FRIDAY PRE-PRIMARY	2.	MO. DAY YEAR	TO	MO. DAY YEAR	RECEIVED 2010 NOV 24 AM 9:51 BOARD OF ELECTIONS LUZERNE COUNTY, PA.							
30 DAY POST-PRIMARY	3.	10 19 10		11 22 10								
6TH TUESDAY PRE-ELECTION	4.	CASH BALANCE AT END OF REPORTING PERIOD: \$ 40.59										
2ND FRIDAY PRE-ELECTION	5.	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ 0										
30 DAY POST-ELECTION	6. <input checked="" type="checkbox"/>	<table border="1"> <tr> <td>AMENDMENT REPORT?</td> <td>YES</td> <td>NO</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>TERMINATION REPORT?</td> <td>YES</td> <td>NO</td> <td><input checked="" type="checkbox"/></td> </tr> </table>					AMENDMENT REPORT?	YES	NO	<input checked="" type="checkbox"/>	TERMINATION REPORT?	YES
AMENDMENT REPORT?	YES	NO	<input checked="" type="checkbox"/>									
TERMINATION REPORT?	YES	NO	<input checked="" type="checkbox"/>									
ANNUAL REPORT	7.											

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.
 If statement is filed on behalf of a Candidate, the Candidate must sign here.
 If 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
22ND DAY OF **NOVEMBER** 20 **10**

Harold Wesley SIGNATURE OF PERSON SUBMITTING REPORT
HAROLD WESLEY PRINTED NAME
655-5441 DAYTIME TELEPHONE NUMBER

Casey Egan SIGNATURE
 COMMONWEALTH OF PENNSYLVANIA
 NOTARIAL SEAL
CASEY EGAN, NOTARY PUBLIC
 BORO. OF MOOSIC LACKAWANNA COUNTY
 MY COMMISSION EXPIRES APR. 23, 2013

MY COMMISSION EXPIRES **4/23/13** MO. DAY YEAR

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
22ND DAY OF **NOVEMBER** 20 **10**

Bruce Knick SIGNATURE OF CANDIDATE
BRUCE KNICK PRINTED NAME
570 430-7577 DAYTIME TELEPHONE NUMBER

Harold Wesley SIGNATURE
 NOTARIAL SEAL
HAROLD E WESLEY
 Notary Public
DUPONT BORO, LUZERNE COUNTY
 My Commission Expires **Nov 22, 2011**

MY COMMISSION EXPIRES **11 22 2011** MO. DAY YR