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. ✓ | LOBBYIST 3.

Name of Filing Committee, Candidate or Lobbyist: CAMPAIGN TO ELECT ELIZABETH (LIZ) MARTIN

Street Address: P.O. BOX 573

City: DALLAS | State: PA | Zip Code: 18612 -

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		NO
6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST ELECTION	6.	TERMINATION REPORT?	YES		NO
ANNUAL REPORT	7.	▶ YEAR 2010		FILING METHOD ( ) CHECK ONE ▶		PAPER	✓	DISKETTE	

Name of Office Sought by Candidate: DALLAS TWP SUPERVISOR

DATE OF ELECTION MO.	DAY	YEAR	District Number	Office Code	Party Code	County Code
11	3	09		OTH	DEM	40

(SEE INSTRUCTIONS FOR CODES)

Summary of Receipts and Expenditures from: ▶ MO. 01 DAY 01 YEAR 2010 To MO. 12 DAY 31 YEAR 2010

A. Amount Brought Forward From Last Report	$ 473.06
B. Total Monetary Contributions and Receipts (From Schedule I)	$ 6.00
C. Total Funds Available (Sum of Lines A and B)	$
D. Total Expenditures (From Schedule III)	$
E. Ending Cash Balance (Subtract Line D from Line C)	$ 479.06
F. Value of In-Kind Contributions Received (From Schedule II)	$
G. Unpaid Debts and Obligations (From Schedule IV)	$ 1100.00

FOR OFFICE USE ONLY

RECEIVED 2011 JAN 13 PM 2:16 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 13 day of JAN 20 11

Frederick Hockenbury — Signature

COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL FREDERICK HOCKENBURY, NOTARY PUBLIC DALLAS TWP., LUZERNE COUNTY MY COMMISSION EXPIRES MAY 22, 2011

My commission expires ____ YR.

Diane Dreier — Signature of Person Submitting Report

DIANE DREIER — Printed Name

570 — Area Code | 675-5696 — 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 13 day of JAN 20 11

Frederick Hockenbury — Signature

COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL FREDERICK HOCKENBURY, NOTARY PUBLIC DALLAS TWP., LUZERNE COUNTY MY COMMISSION EXPIRES MAY 22, 2011

My commission expires ____ YR.

✓ Elizabeth A. Martin — Signature of Candidate

Elizabeth A. Martin — Printed Name

570 — Area Code | 362-2890 — Daytime Telephone Number

SCHEDULE I

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
COMMITTEE TO ELECT ELIZABETH (LIZ) MARTIN	From 1/1/10 To 12/31/10

1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - $50.00 OR LESS PER CONTRIBUTOR		
TOTAL for the Reporting Period	(1)	$

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

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

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)		
TOTAL for the Reporting Period	(4)	$ 6.00

TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD *(Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)*	$ 6.00

PART E

OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate	Reporting Period
THE COMMITTEE TO ELECT ELIZABETH (LIZ) MARTIN	From 1/1/10 To 12/31/10

Full Name	Mailing Address	City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount	Receipt Description
CITIZENS BANK	MAIN STREET	DALLAS	PA	18612 -	01	25	10	$ 6.00	REFUND OF CHECKING ACCOUNT FEES
				-				$	
				-				$	
				-				$	
				-				$	
				-				$	

PAGE TOTAL $ 6.00

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

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	Reporting Period
COMMITTEE TO ELECT ELIZABETH (LIZ) MARTIN	From 1/1/10 To 12/31/10

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

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

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

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

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

Name of Creditor					Outstanding Balance of Debt
					$
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. —