

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 ^{1.}	COMMITTEE ^{2.} <input checked="" type="checkbox"/>	LOBBYIST ^{3.}																								
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST COMMITTEE TO ELECT BRUCE J. REILLY																												
STREET ADDRESS 143 POPLAR ST																												
CITY WILKES-BARRE	STATE PA	ZIP CODE 18702 -																										
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE	DISTRICT NO.	PARTY	DATE OF ELECTION																								
				MO.	DAY	YEAR																						
6TH TUESDAY PRE-PRIMARY <input type="checkbox"/>	MEMBER OF COUNCIL WILKES BARRE "B"		DEM	5	15	2007																						
2ND FRIDAY PRE-PRIMARY <input type="checkbox"/>				FOR OFFICE USE ONLY																								
30 DAY POST-PRIMARY <input type="checkbox"/>				<table border="1"> <tr> <td>MO.</td> <td>DAY</td> <td>YEAR</td> <td>TO</td> <td>MO.</td> <td>DAY</td> <td>YEAR</td> </tr> <tr> <td>1</td> <td>1</td> <td>2010</td> <td></td> <td>12</td> <td>31</td> <td>2010</td> </tr> </table> <p>CASH BALANCE AT END OF REPORTING PERIOD: \$ 25.39</p> <p>TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ 538.25</p> <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>			MO.	DAY	YEAR	TO	MO.	DAY	YEAR	1	1	2010		12	31	2010	AMENDMENT REPORT?	YES	NO	<input checked="" type="checkbox"/>	TERMINATION REPORT?	YES	NO	<input checked="" type="checkbox"/>
MO.							DAY	YEAR	TO	MO.	DAY	YEAR																
1							1	2010		12	31	2010																
AMENDMENT REPORT?							YES	NO	<input checked="" type="checkbox"/>																			
TERMINATION REPORT?							YES	NO	<input checked="" type="checkbox"/>																			
6TH TUESDAY PRE-ELECTION <input type="checkbox"/>	<p>RECEIVED</p> <p>2011 JAN 31 PM 1:25</p> <p>BOARD OF ELECTIONS LUZERNE COUNTY, PA.</p>																											
2ND FRIDAY PRE-ELECTION <input type="checkbox"/>																												
30 DAY POST-ELECTION <input type="checkbox"/>																												
ANNUAL REPORT <input checked="" type="checkbox"/>																												

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
 31st DAY OF January 2011

Barbara A. Smith
 COMMONWEALTH OF PENNSYLVANIA
 MY COMMISSION EXPIRES

NOTARIAL SEAL
 MO. PA. YR.
 BARBARA A. SMITH, NOTARY PUBLIC
 CITY OF WILKES-BARRE., LUZERNE COUNTY
 MY COMMISSION EXPIRES MARCH 28, 2011

Paula Reilly
 SIGNATURE OF PERSON SUBMITTING REPORT
 PAULETTE REILLY
 PRINTED NAME
 570 829-0846
 AREA CODE DAYTIME TELEPHONE NUMBER

PART II -

If statement is filed on behalf of a Candidate or 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
 31st DAY OF January 2011

Barbara A. Smith
 SIGNATURE
 COMMONWEALTH OF PENNSYLVANIA
 MY COMMISSION EXPIRES

NOTARIAL SEAL
 MO. PA. YR.
 BARBARA A. SMITH, NOTARY PUBLIC
 CITY OF WILKES-BARRE., LUZERNE COUNTY
 MY COMMISSION EXPIRES MARCH 28, 2011

Bruce J. Reilly
 SIGNATURE OF CANDIDATE
 BRUCE J. REILLY
 PRINTED NAME
 570 829-0846
 AREA CODE DAYTIME TELEPHONE NUMBER