Commonwealth of Pennsylvania

CAMPAIGN FINANCE REPORT

PAGE 1 OF 5 (COVER PAGE)

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

					and the second second	13	-		2 4	STATE OF THE PARTY OF	MARKET IN	2
Filer Identification Number:			Report Filed By:		CANDIDATE	1.	COMMIT	TEE	X	LOBB	YIST	3.
Name of Filing Commi	ttee Candidate or L	obbvist	/ / /		1	<i>y</i>	Кондори	1500		12701	1	
(07/11/10)	ITEE TO	ELECT	- L 700	EIN.	1 4	We i	4					
Street Address:	1 6 10	, Duell	1-01			,,,,	-					
10 B	00x 28	62										
City: /			***************************************	·	State: 🖊 🐧		Zip Code):				
MERCI	3R				PH		16	13	<u>7 -</u>			
TYPE OF	6TH TUESDAY	1. 2ND FRIDA		The Control of the Co	DAY	3.	AMENDM	ENT	YES		NO	
REPORT	PRE-PRIMARY	PRE-PRIMA		PO	ST PRIMARY		REPORT?	61.			20 E	
	6TH TUESDAY	4. 2ND FRIDA		1000	DAY ST ELECTION	12	TERMINA REPORT?	TION	YES		NO	X
(place X to the right of	Company Malayer St. A.	7. YEAR	IUN	2000		1/	REPURIT	125	T. Labor	- 45	12.00	^
report type)	REPORT	/. • (c.)			G METHOD CHECK ONE		PAPE	R	\times	DISKI	TTE	
Name of Office Sough	t by Candidate:			D	ATE OF ELEC	TION	District	Offic		Party	Cou	unty
<i>1</i>		1	-	MI	DAY Y	EAR	Number	Code	'. A	Code/	Co	ode
MAGISTE	VIIII LAS	TRICT JUZ	162		1 01 20	47	355	OTF	7	RET	17	<u>'3</u>
1 111010	911001			/	10620	0/	01	(SEE IN	ISTRUC	TIONS	FOR C	ODES)
			EAR		n DAY V	EAR	FC	R OF	FICE L	JSE O	NLY	
Summary of Re		MO. DAY Y	- 41	M								
and Expenditure	es from:	10 23 20	107 T	o [//	26 20	07						
A. Amount Brought	Forward From La	ast Report	\$	1,	343,	26						
B. Total Monetary Contributions and Receipts (From Schedule I)			edule () \$		-0-				2	3	T 30	
C. Total Funds Available (Sum of Lines A and B)			\$	1.	343.	26			1007			<u> </u>
D. Total Expenditures (From Schedule III)			\$		~ o -		DEC			RCE		
E. Ending Cash Balance (Subtract Line D from Line C)			\$	1,	343.	26			1	<u>-</u>	RATI	R C
F. Value of in Kind Contributions Received (From Schedule II)			dule II) \$		- 0 -		T					N N
G. Unpaid Debts an	d Coligations (Fro	m Schedule IV)	\$	3.	000.00	0				=	AN	

SCHEDULE I

PAGE 2 OF _____

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Detailed Summary Page	
Name of Filing Committee or Candidate CHMITTEE to ELECT LORINGA From 10 3	iod <u>/3-2 συ</u> / το <u>//-26-2σ</u> υ /
1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONT	RIBUTOR
TOTAL for the Reporting Period (1)	\$ -0 -
2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	\$ -0-
All Other Contributions (Part B)	\$ -0-
TOTAL for the Reporting Period (2)	\$ -0-
3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ -0 -
All Other Contributions (Part D)	\$ -0 -
TOTAL for the Reporting Period (3)	\$ -0-
4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC.	. (FROM PART E)
TOTAL for the Reporting Period (4)	\$ -0 -
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.)	\$ _0 _
	-

SCHEDULE II

PAGE 3 OF 5

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate OUINITIES TO FLECT LORINISA HINCH	Reporting Per From <u>10</u>		0070 //	1-26-2n
v.				
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$	50.00 OR L	ESS P	ER CONT	RIBUTOR
TOTAL for the Reporting Period	d (1)	\$	-0	
			1000	
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$25	0.00 (FROM	PAH	Γ F)	
TOTAL for the Reporting Period	(2)	\$	-0	_
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FRO	M PART G)	es v	
TOTAL for the Reporting Period	i (3)	\$	-0	
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F.)		\$	- 0	

SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate		, [Reporting		
COMMITTEE TO ELECT LOR	2/NJ	DA HING	#	From/o	1335	0007 to 11-26-2007
CUMMITTEE TO DECLIFICA	. / , 0 .	DIA 1511-				
To Whom Paid			MO.	DAY	YEAR	Amount \$
Mailing Address			Descrip	tion of Exp	penditure	J
City	State	Zip Code (Plus 4)		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		
- working Build			(a)	-		Amount
To Whom Paid			MO.	DAY	YEAR	Amount \$
Mailing Address			Descrip	ition of Exp	penditure	
City	State	Zip Code (Plus 4)		A CONTRACTOR OF THE CONTRACTOR		
To Whom Paid	1		MO.	DAY	YEAR	Amount \$
Mailing Address			Descrip	ition of Exp	penditure	
City	State	Zip Code (Plus 4)				
To Whom Paid			MO.	DAY	YEAR	Amount
Mailing Address			Descrip	tion of Exp	penditure	\$
City	State	Zip Code (Plus 4)				
To Whom Paid			MO.	DAY	YEAR	Amount \$
Mailing Address			Descrip	otion of Exp	penditure	
City	State	Zip Code (Plus 4)				
To Whom Paid			MO.	DAY	YEAR	Amount \$
Mailing Address			Descrip	ition of Exp	penditure	
City	State	Zip Code (Plus 4)				
To Whom Paid	1		MO.	DAY	YEAR	Amount
Mailing Address			Descrip	tion of Exp	penditure	\$
City	State	Zip Code (Plus 4)	_			
To Whom Paid	<u></u>		MO.	DAY	YEAR	Amount
Mailing Address			Descrip	tion of Exp	penditure	\$
City	State	Zip Code (Plus 4)		***************************************		
		_				
						PAGE TOTAL
Enter Grand Total of Expenditures on Page	ge 1,	Report Cover	Page, I	tem D.		\$ - 0 -

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.

lame of Filing Committee or Candidate		Reporting Period	-2007To 11-26-200
DAMITTEE to KLEET	LORINISA HINCH	7 101170	900/10/11/90/900
ampe of Creditor			Outstanding Balance of De
LOCINISA HINCH	DATE	MO. DAY YEAR	\$ 500,00
319 QUINCE ST.	DEBT INCURRED	01 23 200	7
1/20		State Zip Code (Plus 4)	
MERCER escription of Debt		V 1/6/3/	
LOAN TO COMMITTER	5		
LORINDA HINCH			Outstanding Balance of Di \$ 2,500,00
ailing Address	DATE DEBT	MO. DAY YEAR	
319 QUINCE ST	INCURRED	03 23 2007 State Zip Code (Plus 4)	
MERCER		PA 16137	
Scription of Debt		•	
ame of Creditor			Outstanding Balance of D
ailing Address	DATE	MO. DAY YEAR	\$
•	DEBT INCURRED	MO. GAT TEAM	
ŧΫ		State Zip Code (Plus 4)	
escription of Debt			
ame of Creditor			Outstanding Balance of D
			\$
ailing Address	DATE DEBT	MO. DAY YEAR	
ity	INCURRED	State Zip Code (Plus 4)	
escription of Debt			
ame of Creditor			Outstanding Balance of D
ailing Address	DATE	MO. DAY YEAR	
ty	DEBT INCURRED	State Zip Code (Plus 4)	
•		State Zip Code (Plus 4)	
scription of Debt			
ame of Creditor			Outstanding Balance of D
alline Address		10.00	\$
ailing Address	DATE DEBT	MO. DAY YEAR	
ity	INCURRED	State Zip Code (Plus 4)	
escription of Debt			
			PAGE TOTAL
nter Grand Total of Unpaid Debts	on Page 1, Report Cover	Page, Item G.	\$3,000.00