

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

SECRETARY OF THE SENATE
09 AUG -4 AM 10:16

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FB4M5**

Pike County Democratic Committee

ADDRESS (number and street) *PO Box 855*

Check if different than previously reported. (ACC) *Malford PA 18337*

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C 00456327

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P)	General (12G)	Runoff (12R)
Convention (12C)	Special (12S)	

Election on *2009 AUG -4 P 3:58*

(d) 30-Day POST-Election Report for the:

General (30G)	Runoff (30R)	Special (30S)
---------------	--------------	---------------

Election on

5. Covering Period *01 01 2009* through *06 30 2009*

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer *Cheryl R. Glenn*

Signature of Treasurer *[Signature]* Date *07 23 2009*

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3X
Rev. 12/2004

29030141792

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Pike County Democratic Committee

Report Covering the Period: From: ^{M M ' D D ' Y Y Y Y}*01 ' 01 ' 2009* To: ^{M M ' D D ' Y Y Y Y}*06 ' 30 ' 2009*

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> January 1,		<i>3,837.00</i>
(b) Cash on Hand at Beginning of Reporting Period.....	<i>3,837.00</i>	
(c) Total Receipts (from Line 19).....	<i>8,700.00</i>	<i>8,700.00</i>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<i>4,707.00</i>	<i>4,707.00</i>
7. Total Disbursements (from Line 31).....	<i>18,617.77</i>	<i>18,617.77</i>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6 d).....	<i>28,452.3</i>	<i>28,452.3</i>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....		

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

29030141793

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Pike County Democratic Committee

Report Covering the Period: From:

01 ' 01 ' 2009

To:

06 ' 30 ' 2009

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other
Than Political Committees

(i) Itemized (use Schedule A).....

(ii) Unitemized.....

(iii) TOTAL (add
Lines 11(a)(i) and (ii)).....▶

(b) Political Party Committees.....

(c) Other Political Committees
(such as PACs).....

(d) Total Contributions (add Lines
11(a)(iii), (b), and (c)) (Carry
Totals to Line 33, page 5).....▶

12. Transfers From Affiliated/Other
Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures
(Refunds, Rebates, etc.)
(Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made
to Federal Candidates and Other
Political Committees.....

17. Other Federal Receipts
(Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account
(from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c)).....▶

20. Total Federal Receipts
(subtract Line 18(c) from Line 19).....▶

	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....		
(ii) Unitemized.....	<i>87000</i>	<i>87000</i>
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	<i>87000</i>	<i>87000</i>
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶		
12. Transfers From Affiliated/Other Party Committees.....		
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....		
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....		
(b) Levin Funds (from Schedule H5).....		
(c) Total Transfers (add 18(a) and 18(b))..		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	<i>87000</i>	<i>87000</i>
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	<i>87000</i>	<i>87000</i>

29030141794

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

29030141795

II. Disbursements		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share			
(ii) Non-Federal Share			
(b) Other Federal Operating Expenditures			
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	▶		
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees			
24. Independent Expenditures (use Schedule E)			
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees			
(b) Political Party Committees			
(c) Other Political Committees (such as PACs)			
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	▶		
29. Other Disbursements		186177	186177
30. Federal Election Activity (2 U.S.C. §431(20))			
(a) Allocated Federal Election Activity (from Schedule H6)			
(i) Federal Share			
(ii) "Levin" Share			
(b) Federal Election Activity Paid Entirely With Federal Funds			
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	▶		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..		1,861,777	1,861,777
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	▶		

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)		
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))		
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0	0

29030141796

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 6 OF 14
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input checked="" type="checkbox"/> 25	<input type="checkbox"/> 26	
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Pike County Democratic Committee

A. *Emthleit*
 Full Name (Last, First, Middle Initial)
 Mailing Address: *P.O. Box 6452*
 City: *Coral Stream* State: *IL* Zip Code: *60197*
 Purpose of Disbursement: *website*
 Candidate Name: _____
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) *operating expense*
 State: _____ District: _____

Date of Disbursement: *01 '13' 2009*
 Amount of Each Disbursement this Period: *1995*
 Category/Type: *001*

B. *Laurel Ridge Restaurant*
 Full Name (Last, First, Middle Initial)
 Mailing Address: *Rt 739*
 City: _____ State: *PA* Zip Code: *1*
 Purpose of Disbursement: *Inaugural Celebration*
 Candidate Name: _____
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) *operating expense*
 State: _____ District: _____

Date of Disbursement: *01 '17' 2009*
 Amount of Each Disbursement this Period: *60292*
 Category/Type: *001*

C. *Cheryl R. Glenn*
 Full Name (Last, First, Middle Initial)
 Mailing Address: *RR, Box 689*
 City: *Dingmans Ferry* State: *PA* Zip Code: *18328*
 Purpose of Disbursement: *Reimbursement office supplies*
 Candidate Name: _____
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) *operating expense*
 State: _____ District: _____

Date of Disbursement: *02 '02' 2009*
 Amount of Each Disbursement this Period: *4533*
 Category/Type: *001*

SUBTOTAL of Disbursements This Page (optional).....▶ *66820*
 TOTAL This Period (last page this line number only).....▶

29030141797

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)					
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input checked="" type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Pike County Democratic Committee

A. *Walmart*

Full Name (Last, First, Middle Initial)

Mailing Address: *Rt 6-E Rt 209*

City: *Matamoras PA* State: *PA* Zip Code: *18336*

Purpose of Disbursement: *Office Supplies / Periodic Contract*

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) *operating expense*

State: _____ District: _____

Date of Disbursement: *02 02 2009*

Amount of Each Disbursement this Period: *57.18*

Category/Type: *001*

B. *Earthlink*

Full Name (Last, First, Middle Initial)

Mailing Address: *P.O. Box 6452*

City: *Coral Stream IL* State: *IL* Zip Code: *60197*

Purpose of Disbursement: *website*

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) *operating expense*

State: _____ District: _____

Date of Disbursement: *02 17 2009*

Amount of Each Disbursement this Period: *1.995*

Category/Type: *001*

C. *Cheryl R Glenn*

Full Name (Last, First, Middle Initial)

Mailing Address: *Rt 1 Box 689*

City: *Dingmans Ferry PA* State: *PA* Zip Code: *18328*

Purpose of Disbursement: *Reimburse Notary Fee*

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) *operating expense*

State: _____ District: _____

Date of Disbursement: *02 25 2009*

Amount of Each Disbursement this Period: *10.00*

Category/Type: *001*

SUBTOTAL of Disbursements This Page (optional)..... *87.13*

TOTAL This Period (last page this line number only).....

29030141798

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Pike County Democratic Committee

A. Full Name (Last, First, Middle Initial) *USPS*

Mailing Address *Stanford St.*

City *Milford* State *PA* Zip Code *18337*

Purpose of Disbursement *Stamps*

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) *operating expense*

State: _____ District: _____

Date of Disbursement *02 26 2009*

Amount of Each Disbursement this Period *42.00*

Category/Type *001*

B. Full Name (Last, First, Middle Initial) *Walnut*

Mailing Address *Rt 6 E Rt 209*

City *Mattmans* State *PA* Zip Code *18336*

Purpose of Disbursement *Measures Expense*

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) *General operating exp.*

State: _____ District: _____

Date of Disbursement *03 01 2009*

Amount of Each Disbursement this Period *547.00*

Category/Type _____

C. Full Name (Last, First, Middle Initial) *Earthlink*

Mailing Address *P.O. Box 6452*

City *Coral Stream* State *FL* Zip Code *60197*

Purpose of Disbursement *Website*

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) *operating expense*

State: _____ District: _____

Date of Disbursement *03 17 2009*

Amount of Each Disbursement this Period *19.95*

Category/Type *001*

SUBTOTAL of Disbursements This Page (optional) *116.65*

TOTAL This Period (last page this line number only)

29030141799

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 17

21b 22 23 24 25 26
 27 28a 28b 28c 29 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Pike County Democratic Committee

A. Full Name (Last, First, Middle Initial) Earthlink Date of Disbursement 04' 17' 2009
 Mailing Address P.O. Box 6452
 City Coral Gables State FL Zip Code 33134
 Purpose of Disbursement Website Amount of Each Disbursement this Period 19.95
 Candidate Name _____ Category/Type 001
 Office Sought: House Senate President Disbursement For: Primary General Other (specify) operating expense
 State: _____ District: _____

B. Full Name (Last, First, Middle Initial) Office Depot Date of Disbursement 04' 27' 2009
 Mailing Address Rt 15
 City Rockaway State NY Zip Code _____
 Purpose of Disbursement Copies Amount of Each Disbursement this Period 4.82
 Candidate Name _____ Category/Type 001
 Office Sought: House Senate President Disbursement For: Primary General Other (specify) operating expense
 State: _____ District: _____

C. Full Name (Last, First, Middle Initial) Walmart Date of Disbursement 05' 01' 2009
 Mailing Address Rt 6 & Rt 209
 City Matamoras State PA Zip Code 18336
 Purpose of Disbursement Office Supplies, sympathy cards etc Amount of Each Disbursement this Period 33.57
 Candidate Name _____ Category/Type 001
 Office Sought: House Senate President Disbursement For: Primary General Other (specify) operating expense
 State: _____ District: _____

SUBTOTAL of Disbursements This Page (optional) 58.34
 TOTAL This Period (last page this line number only) _____

29030141800

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 14

21b 22 23 24 25 26
 27 28a 28b 28c 29 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Pike Coeretz Democratic Comm. Htee

Full Name (Last, First, Middle Initial)

A. *Poc Mon +*

Mailing Address: *Bushkill Rd*

City: *Bushkill PA* State: *PA* Zip Code: *18337*

Purpose of Disbursement: *Deposit for dinner & booze*

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) *operating expense*

State: _____ District: _____

Date of Disbursement: *05 01 2009*

Amount of Each Disbursement this Period: *500.00*

Category/Type: *001*

B. *Rita Tucker Memorial Foundation*

Mailing Address: *c/o John Tucker 336 Hambling Way*

City: *Milford PA* State: *PA* Zip Code: *18337*

Purpose of Disbursement: *Donation in Memory of John Tucker*

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) *operating expense*

State: _____ District: _____

Date of Disbursement: *05 07 2009*

Amount of Each Disbursement this Period: *100.00*

Category/Type: *001*

C. *Karen Scallo*

Mailing Address: *106 Crown Lane*

City: *Milford PA* State: *PA* Zip Code: *18337*

Purpose of Disbursement: *Journal expense*

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) *operating expense*

State: _____ District: _____

Date of Disbursement: *05 12 2009*

Amount of Each Disbursement this Period: *94.74*

Category/Type: *001*

SUBTOTAL of Disbursements This Page (optional).....▶

694.74

TOTAL This Period (last page this line number only).....▶

29030141801

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 14

21b 22 23 24 25 26
 27 28a 28b 28c 29 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Pike County Democratic Committee

A. *Earthlink*
Full Name (Last, First, Middle Initial)
Mailing Address: *P.O. Box 6452*
City: *Coral Stream* State: *IL* Zip Code: *60197*
Purpose of Disbursement: *Website*
Candidate Name: _____
Office Sought: House Senate President
Disbursement For: Primary General Other (specify) *operating expense*
State: _____ District: _____
Date of Disbursement: *05 17 2009*
Amount of Each Disbursement this Period: *1995*
Category/Type: *001*

B. *Cheryl R Glenn*
Full Name (Last, First, Middle Initial)
Mailing Address: *RR 1 Box 689*
City: *Dingmans Ferry* State: *PA* Zip Code: *18328*
Purpose of Disbursement: *Reimbursement Notary Fee*
Candidate Name: _____
Office Sought: House Senate President
Disbursement For: Primary General Other (specify) *operating expense*
State: _____ District: _____
Date of Disbursement: *06 08 2009*
Amount of Each Disbursement this Period: *10.00*
Category/Type: *001*

C. *Earthlink*
Full Name (Last, First, Middle Initial)
Mailing Address: *P.O. Box 6452*
City: *Coral Stream* State: *IL* Zip Code: *60197*
Purpose of Disbursement: *Website*
Candidate Name: _____
Office Sought: House Senate President
Disbursement For: Primary General Other (specify) *operating expense*
State: _____ District: _____
Date of Disbursement: *06 17 2009*
Amount of Each Disbursement this Period: *1995*
Category/Type: *001*

SUBTOTAL of Disbursements This Page (optional)..... *4990*
TOTAL This Period (last page this line number only).....

29030141802

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 19

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Pike County Democratic Committee

Full Name (Last, First, Middle Initial)

A. <i>Walmart</i>		Date of Disbursement
Mailing Address <i>Rt 6 E Rt 209</i>		<i>06' 22' 2009</i>
City <i>Matamoras</i>	State <i>PA</i>	Zip Code <i>18336</i>
Purpose of Disbursement <i>Get well gift - Norm Welton</i>	Candidate Name	Amount of Each Disbursement this Period <i>1802</i>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <i>operating expense</i>	Category/Type <i>001</i>
State: District:		

B. <i>Cheryl R Glenn</i>		Date of Disbursement
Mailing Address <i>Rt. Box 689</i>		<i>06' 22' 2009</i>
City <i>Dillsburg Ferry</i>	State <i>PA</i>	Zip Code <i>18328</i>
Purpose of Disbursement <i>Reimbursement Notary Fee</i>	Candidate Name	Amount of Each Disbursement this Period <i>1000</i>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <i>operating expense</i>	Category/Type <i>001</i>
State: District:		

C. <i>Walmart</i>		Date of Disbursement
Mailing Address <i>Rt 6 E Rt 209</i>		<i>06' 29' 2009</i>
City <i>Matamoras</i>	State <i>PA</i>	Zip Code <i>18336</i>
Purpose of Disbursement <i>Pender Court / Formal Invoice</i>	Candidate Name	Amount of Each Disbursement this Period <i>5586</i>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <i>operating expense</i>	Category/Type <i>001</i>
State: District:		

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

8388

29030141803

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 OF 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Pike County Democratic Committee

A. *Walmart*
Full Name (Last, First, Middle Initial)

Mailing Address
Rt 6 E Rt 209

City *Matamoras* State *PA* Zip Code *18336*

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) *operational expense*

State: District:

Date of Disbursement
06' 22' 2009

Amount of Each Disbursement this Period
41.06

Category/Type
001

B. *Office Depot*
Full Name (Last, First, Middle Initial)

Mailing Address
Rt 15

City *Rockaway* State *NJ* Zip Code

Purpose of Disbursement
Copies

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
06' 29' 2009

Amount of Each Disbursement this Period
40.18

Category/Type
001

C. *Staples*
Full Name (Last, First, Middle Initial)

Mailing Address
Rt 6 E Rt 209

City *Matamoras* State *PA* Zip Code *18336*

Purpose of Disbursement
Formal Invitation Stock Paper

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
06' 30' 2009

Amount of Each Disbursement this Period
24.37

Category/Type
001

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

76.23

29030141804

**SCHEDULE B (FEC Form 3X)
DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Pike County Democratic Committee

A.

Full Name (Last, First, Middle Initial)
USPS

Mailing Address
Hindard St.

City
Milford State
PA Zip Code
18337

Purpose of Disbursement
Postage / Formal Invites

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) *operating expense*

State: District:

Date of Disbursement
06 / 30 / 2009

Amount of Each Disbursement this Period
2670

Category/Type
001

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

Category/Type

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional).....▶ *2670*

TOTAL This Period (last page this line number only).....▶ *186177*

29030141805

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked
7/28/09

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt
8/4/09

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

 8/4/09
PREPARER **DATE PREPARED**

29030141806