

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
GREEN PARTY OF LUZERNE COUNTY PA

ADDRESS (number and street) 308 SPRING STREET  
 Check if different than previously reported. (ACC)  
HANOVER TWP. PA 18706 5932

2. **FEC IDENTIFICATION NUMBER** C00424820  
**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 Quarterly 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 (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 04 01 2006 through 06 30 2006

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 Mr. SHANE VINCENT NOVAK

Signature of Treasurer Electronically Filed by Mr. SHANE VINCENT NOVAK Date 04 17 2010

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)

A. Form/Schedule : **F3XA**

Transaction ID :

Attn: Corbin No business expenses for treasure he is voluntary, all dispersment are for federal/non-federal candidates. They should be as in-kind contributions on their 3 form? Shane Novak

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
GREEN PARTY OF LUZERNE COUNTY PA

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		26.30
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	26.30									
(c) Total Receipts (from Line 19) .....	66000.00	66000.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	66026.30	66026.30								
7. Total Disbursements (from Line 31) .....	41000.00	41000.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	25026.30	25026.30								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
GREEN PARTY OF LUZERNE COUNTY PA

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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) .....	66000.00	66000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	66000.00	66000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	66000.00	66000.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	66000.00	66000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	66000.00	66000.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	24500.00	24500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	16500.00	16500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	41000.00	41000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	41000.00	41000.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

6 / 21

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) .....	66000.00	66000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	66000.00	66000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 21  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
GREEN PARTY OF LUZERNE COUNTY PA

**A.**

Full Name (Last, First, Middle Initial)  
Mr. GARY ANDRES

Mailing Address INFORMATION REQUESTED

City ARLINGTON State VA Zip Code 22313

FEC ID number of contributing federal political committee. **C**

Name of Employer DUTCO Occupation PARTNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 06 / 12 / 2006  
**Transaction ID:** SA11AI.4123  
Amount of Each Receipt this Period: 1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Ms MARJORIE BUCKLEY

Mailing Address 1635 COUNTRY ROAD

City BETHLEHEM State PA Zip Code 18015

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 06 / 06 / 2006  
**Transaction ID:** SA11AI.4115  
Amount of Each Receipt this Period: 1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. WALTER W. BUCKLEY, Jr.

Mailing Address 1635 COUNTRY ROAD

City BETHLEHEM State PA Zip Code 18015

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYEED Occupation INVESTER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 06 / 06 / 2006  
**Transaction ID:** SA11AI.4117  
Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 8 / 21  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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)  
GREEN PARTY OF LUZERNE COUNTY PA

**A.** Full Name (Last, First, Middle Initial)  
Mr. WILLIAM GRUBE

Mailing Address C/O 1280 CHRUCH STREET

City State Zip Code  
FOGELSVILLE PA 18051

FEC ID number of contributing federal political committee. **C**

Name of Employer BENVEC,INC      Occupation PRESIDENT AND CEO

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	6	/	2	0	0	6

**Transaction ID:** SA11AI.4104

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. RALPH W. HOOPER

Mailing Address 489 DEVON PARK DRIVE

City State Zip Code  
WAYNE PA 19087

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED      Occupation RETIRED

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	6	/	2	0	0	6

**Transaction ID:** SA11AI.4113

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. JAMES HOWMEN

Mailing Address 640 A AVE.

City State Zip Code  
CORONADO CA 92118

FEC ID number of contributing federal political committee. **C**

Name of Employer SAN DIEGO READER      Occupation EDITOR

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	0	/	2	0	0	6

**Transaction ID:** SA11AI.4133

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **15000.00**

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



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 21
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)  
GREEN PARTY OF LUZERNE COUNTY PA

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. DAVID KIERSZNOWSKI	Date of Receipt MM / DD / YYYY 06 / 12 / 2006
	Mailing Address INFORMATION REQUESTED	<b>Transaction ID:</b> SA11AI.4127
	City State Zip Code LEAWOOD KS 66209	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation D.E.M.D.C.O. PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Ms EILEEN M. MAGUIRE	Date of Receipt MM / DD / YYYY 06 / 06 / 2006
	Mailing Address 489 DEVON DRIVE	<b>Transaction ID:</b> SA11AI.4111
	City State Zip Code WAYNE PA 19087	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. MARK PASQUERILLA	Date of Receipt MM / DD / YYYY 06 / 12 / 2006
	Mailing Address INFORMATION REQUESTED	<b>Transaction ID:</b> SA11AI.4121
	City State Zip Code JOHNSTOWN PA 15901	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CROWN AMERICAN PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	15000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 21

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
**GREEN PARTY OF LUZERNE COUNTY PA**

**A.**

Full Name (Last, First, Middle Initial)  
Mr. ANTHONY SALVAGGIO

Mailing Address **C/O 1280 CHURCH STREET**

City **FOGELSVILLE** State **PA** Zip Code **18051**

FEC ID number of contributing federal political committee. **C**

Name of Employer **COMPUTER AIDE, INC** Occupation **PRESIDENT**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 06 / 2006

**Transaction ID: SA11AI.4107**

Amount of Each Receipt this Period 1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. FRANKLIN K. SCHONEMANN

Mailing Address **P.O. 600**

City **POTTSVILLE** State **PA** Zip Code **17901**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 06 / 2006

**Transaction ID: SA11AI.4119**

Amount of Each Receipt this Period 5000.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. GEORGE E. SEAY, III

Mailing Address **3917 EUCLID**

City **DALLAS** State **TX** Zip Code **75205**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AVONDALE CAPITAL** Occupation **OFFICER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 20 / 2006

**Transaction ID: SA11AI.4135**

Amount of Each Receipt this Period 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... 11000.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 11 / 21  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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)  
GREEN PARTY OF LUZERNE COUNTY PA

**A.** Full Name (Last, First, Middle Initial)  
Mr. CHARLES D. SNELLING

Mailing Address 1280 CHURCH STRET

City State Zip Code  
FOGLESVILLE PA 18051

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYEED VENTURE CAPITALIST

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 06 / 2006

**Transaction ID:** SA11AI.4109

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. CHRISTIAN TAYLOR

Mailing Address 515 SANTA PAULA DRIVE

City State Zip Code  
SALINAS CA 93901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
STUDENT STUDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2006

**Transaction ID:** SA11AI.4139

Amount of Each Receipt this Period  
4000.00

**C.** Full Name (Last, First, Middle Initial)  
Ms KATHRYN TAYLOR

Mailing Address 515 SANATA PAULA DRIVE

City State Zip Code  
SALINAS CA 93901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2006

**Transaction ID:** SA11AI.4143

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **6000.00**

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 12 / 21  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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)  
GREEN PARTY OF LUZERNE COUNTY PA

**A.** Full Name (Last, First, Middle Initial)  
Mr. KYLE TAYLOR

Mailing Address 515 SANTA PAULA DRIVE

City SALINAS State CA Zip Code 93901

FEC ID number of contributing federal political committee. **C**

Name of Employer STUDENT Occupation STUDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt: 06 / 20 / 2006  
Transaction ID: SA11AI.4137  
Amount of Each Receipt this Period: 4000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. STEVEN TAYLOR

Mailing Address 515 SANTA PAULA DRIVE

City SALINAS State CA Zip Code 93901

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYEED Occupation SELF-EMPLOYEED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 06 / 20 / 2006  
Transaction ID: SA11AI.4141  
Amount of Each Receipt this Period: 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. WILLIAM WICHTERMAN

Mailing Address INFORMATION REQUESTED

City FAIRFAX State VA Zip Code 22031

FEC ID number of contributing federal political committee. **C**

Name of Employer COVINGTON AND BURLINGTON Occupation ADVISOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 06 / 12 / 2006  
Transaction ID: SA11AI.4125  
Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6000.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 / 21
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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)  
GREEN PARTY OF LUZERNE COUNTY PA

**A.**

Full Name (Last, First, Middle Initial) Ms CAROL ANN WOLFINGTON		Date of Receipt
Mailing Address 535 MAISON PLACE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 6 / 1 3 / 2 0 0 6
City	State	Zip Code
BRIN MAWR	PA	19010
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.4129
C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer INFORMATION REQUESTED		<input type="text"/> 5000.00
Occupation INFORMATION REQUESTED		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/> 5000.00	
<input type="checkbox"/> Other (specify) ▼		

**B.**

Full Name (Last, First, Middle Initial) Mr. HARRY WOLFINGTON		Date of Receipt
Mailing Address 535 MAISON PLACE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 6 / 1 3 / 2 0 0 6
City	State	Zip Code
BRIN MAWR	PA	19010
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.4131
C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer INFORMATION REQUESTED		<input type="text"/> 5000.00
Occupation INFORMATION REQUESTED		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/> 5000.00	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 10000.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/> 66000.00

**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	<input type="checkbox"/> 22	<input checked="" 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 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)  
GREEN PARTY OF LUZERNE COUNTY PA

A.	Full Name (Last, First, Middle Initial) JSM INC	Transaction ID: SB23.4261
	Mailing Address 7 SPRINGS BLVD.	Date of Disbursement 06 / 05 / 2006
	City NEW FORT RICHEY State FL Zip Code 34655	Amount of Each Disbursement this Period 3000.00
	Purpose of Disbursement Contribution for Federal Candidates Ballot Access	011 Category/ Type
	Candidate Name GRETA BROWNE	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 15	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JSM INC	Transaction ID: SB23.4262
	Mailing Address 7 SPRINGS BLVD.	Date of Disbursement 06 / 05 / 2006
	City NEW FORT RICHEY State FL Zip Code 34655	Amount of Each Disbursement this Period 3000.00
	Purpose of Disbursement Contribution for Federal Candidates Ballot Access	011 Category/ Type
	Candidate Name DERF W. MAITLAND	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 19	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JSM INC	Transaction ID: SB23.4268
	Mailing Address 7 SPRINGS BLVD.	Date of Disbursement 06 / 05 / 2006
	City NEW FORT RICHEY State FL Zip Code 34655	Amount of Each Disbursement this Period 3000.00
	Purpose of Disbursement Contribution for Federal Candidates Ballot Access	011 Category/ Type
	Candidate Name TITUS NORTH	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 14	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	9000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# 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	<input type="checkbox"/> 22	<input checked="" 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 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)  
GREEN PARTY OF LUZERNE COUNTY PA

<b>A.</b> Full Name (Last, First, Middle Initial) JSM INC <hr/> Mailing Address 7 SPRINGS BLVD. <hr/> City NEW FORT RICHEY State FL Zip Code 34655 <hr/> Purpose of Disbursement Contribution for Federal Candidates Ballot Access <hr/> Candidate Name Mr. Carl Romaenlli <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: <hr/> Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4269 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 6
	Amount of Each Disbursement this Period 3000.00
	Category/ Type 011
	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) JSM INC <hr/> Mailing Address 7 SPRINGS BLVD. <hr/> City NEW FORT RICHEY State FL Zip Code 34655 <hr/> Purpose of Disbursement Contribution for Federal Candidates Ballot Access <hr/> Candidate Name Mr. Dave Baker <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 02 <hr/> Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4260 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 6
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 011
	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) JSM INC <hr/> Mailing Address 7 SPRINGS BLVD. <hr/> City NEW FORT RICHEY State FL Zip Code 34655 <hr/> Purpose of Disbursement Contribution for Federal Candidates Ballot Access <hr/> Candidate Name GRETA BROWNE <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 15 <hr/> Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4280 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 6
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 011
	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

8000.00

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

**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	<input type="checkbox"/> 22	<input checked="" 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 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)  
GREEN PARTY OF LUZERNE COUNTY PA

A.	Full Name (Last, First, Middle Initial) JSM INC	Transaction ID: SB23.4281 Date of Disbursement
	Mailing Address 7 SPRINGS BLVD.	<input type="text" value="06"/> / <input type="text" value="20"/> / <input type="text" value="2006"/>
	City NEW FORT RICHEY State FL Zip Code 34655	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution for Federal Candidates Ballot Access	<input type="text" value="2500.00"/>
	Candidate Name DERF W. MAITLAND	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 19	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JSM INC	Transaction ID: SB23.4282 Date of Disbursement
	Mailing Address 7 SPRINGS BLVD.	<input type="text" value="06"/> / <input type="text" value="20"/> / <input type="text" value="2006"/>
	City NEW FORT RICHEY State FL Zip Code 34655	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution for Federal Candidates Ballot Access	<input type="text" value="2500.00"/>
	Candidate Name TITUS NORTH	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 14	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JSM INC	Transaction ID: SB23.4283 Date of Disbursement
	Mailing Address 7 SPRINGS BLVD.	<input type="text" value="06"/> / <input type="text" value="20"/> / <input type="text" value="2006"/>
	City NEW FORT RICHEY State FL Zip Code 34655	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution for Federal Candidates Ballot Access	<input type="text" value="2500.00"/>
	Candidate Name Mr. Carl Romaenlli	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="7500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="24500.00"/>



**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 17 / 21

<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)  
GREEN PARTY OF LUZERNE COUNTY PA

A.	Full Name (Last, First, Middle Initial) JSM INC	Transaction ID: SB29.4258 Date of Disbursement 06 / 05 / 2006
	Mailing Address 7 SPRINGS BLVD.	Amount of Each Disbursement this Period 3000.00
	City NEW FORT RICHEY State FL Zip Code 34655	
	Purpose of Disbursement in-kind Candidate Name Mike Rosenberg	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District:	Disbursement For: 2000 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JSM INC	Transaction ID: SB29.4273 Date of Disbursement 06 / 05 / 2006
	Mailing Address 7 SPRINGS BLVD.	Amount of Each Disbursement this Period 3000.00
	City NEW FORT RICHEY State FL Zip Code 34655	
	Purpose of Disbursement in-kind Candidate Name Christina Valente	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District:	Disbursement For: 2000 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JSM INC	Transaction ID: SB29.4276 Date of Disbursement 06 / 05 / 2006
	Mailing Address 7 SPRINGS BLVD.	Amount of Each Disbursement this Period 3000.00
	City NEW FORT RICHEY State FL Zip Code 34655	
	Purpose of Disbursement in-kind Candidate Name Markay Rodgers	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District:	Disbursement For: 2000 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	9000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**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 18 / 21

<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)  
GREEN PARTY OF LUZERNE COUNTY PA

A.	Full Name (Last, First, Middle Initial) JSM INC	Transaction ID: SB29.4277 Date of Disbursement 06 / 20 / 2006
	Mailing Address 7 SPRINGS BLVD.	Amount of Each Disbursement this Period 2500.00
	City NEW FORT RICHEY State FL Zip Code 34655	
	Purpose of Disbursement in-kind Candidate Name Mike Rosenberg	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District:	Disbursement For: 2000 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JSM INC	Transaction ID: SB29.4278 Date of Disbursement 06 / 20 / 2006
	Mailing Address 7 SPRINGS BLVD.	Amount of Each Disbursement this Period 2500.00
	City NEW FORT RICHEY State FL Zip Code 34655	
	Purpose of Disbursement in-kind Candidate Name Christina Valente	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District:	Disbursement For: 2000 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JSM INC	Transaction ID: SB29.4279 Date of Disbursement 06 / 20 / 2006
	Mailing Address 7 SPRINGS BLVD.	Amount of Each Disbursement this Period 2500.00
	City NEW FORT RICHEY State FL Zip Code 34655	
	Purpose of Disbursement in-kind Candidate Name Markay Rodgers	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District:	Disbursement For: 2000 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>7500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>16500.00</b>

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
GREEN PARTY OF LUZERNE COUNTY PA

<b>A. Full Name (Last, First, Middle Initial)</b> JSM INC			Type of Allocated Activity: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input checked="" type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 7 SPRINGS BLVD.			Allocated Activity or Event Year-To-Date 3000.00	
City NEW FORT RICHEY	State FL	Zip Code 34655	Date MM / DD / YYYY 06 / 05 / 2006	
Purpose of Disbursement: Contribution for Federal Candidates			Category/ Type 011	Transaction ID: H4.4261

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3000.00		0.00		3000.00

<b>B. Full Name (Last, First, Middle Initial)</b> JSM INC			Type of Allocated Activity: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input checked="" type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 7 SPRINGS BLVD.			Allocated Activity or Event Year-To-Date 6000.00	
City NEW FORT RICHEY	State FL	Zip Code 34655	Date MM / DD / YYYY 06 / 05 / 2006	
Purpose of Disbursement: Contribution for Federal Candidates			Category/ Type 011	Transaction ID: H4.4262

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3000.00		0.00		3000.00

<b>C. Full Name (Last, First, Middle Initial)</b> JSM INC			Type of Allocated Activity: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input checked="" type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 7 SPRINGS BLVD.			Allocated Activity or Event Year-To-Date 9000.00	
City NEW FORT RICHEY	State FL	Zip Code 34655	Date MM / DD / YYYY 06 / 05 / 2006	
Purpose of Disbursement: Contribution for Federal Candidates			Category/ Type 011	Transaction ID: H4.4268

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3000.00		0.00		3000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
GREEN PARTY OF LUZERNE COUNTY PA

<b>A. Full Name (Last, First, Middle Initial)</b> JSM INC			Type of Allocated Activity: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input checked="" type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7 SPRINGS BLVD.			Allocated Activity or Event Year-To-Date 12000.00		
City NEW FORT RICHEY	State FL	Zip Code 34655	Date MM / DD / YYYY 06 / 05 / 2006		
Purpose of Disbursement: Contribution for Federal Candidates			Transaction ID: H4.4269		
Activity or Event Identifier: Ballot Access(06/30/2006) (Sch.B.23)[Federal Memo]			Category/ Type 011		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3000.00		0.00		3000.00

<b>B. Full Name (Last, First, Middle Initial)</b> JSM INC			Type of Allocated Activity: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input checked="" type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7 SPRINGS BLVD.			Allocated Activity or Event Year-To-Date 14500.00		
City NEW FORT RICHEY	State FL	Zip Code 34655	Date MM / DD / YYYY 06 / 20 / 2006		
Purpose of Disbursement: Contribution for Federal Candidates			Transaction ID: H4.4260		
Activity or Event Identifier: Ballot Access(06/30/2006) (Sch.B.23)[Federal Memo]			Category/ Type 011		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2500.00		0.00		2500.00

<b>C. Full Name (Last, First, Middle Initial)</b> JSM INC			Type of Allocated Activity: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input checked="" type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7 SPRINGS BLVD.			Allocated Activity or Event Year-To-Date 17000.00		
City NEW FORT RICHEY	State FL	Zip Code 34655	Date MM / DD / YYYY 06 / 20 / 2006		
Purpose of Disbursement: Contribution for Federal Candidates			Transaction ID: H4.4280		
Activity or Event Identifier: Ballot Access(06/30/2006) (Sch.B.23)[Federal Memo]			Category/ Type 011		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2500.00		0.00		2500.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
GREEN PARTY OF LUZERNE COUNTY PA

<b>A. Full Name (Last, First, Middle Initial)</b> JSM INC			Type of Allocated Activity: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input checked="" type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7 SPRINGS BLVD.			Allocated Activity or Event Year-To-Date 19500.00		
City NEW FORT RICHEY	State FL	Zip Code 34655	Date MM / DD / YYYY 06 / 20 / 2006		
Purpose of Disbursement: Contribution for Federal Candidates			Transaction ID: H4.4281		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2500.00		0.00		2500.00

<b>B. Full Name (Last, First, Middle Initial)</b> JSM INC			Type of Allocated Activity: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input checked="" type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7 SPRINGS BLVD.			Allocated Activity or Event Year-To-Date 22000.00		
City NEW FORT RICHEY	State FL	Zip Code 34655	Date MM / DD / YYYY 06 / 20 / 2006		
Purpose of Disbursement: Contribution for Federal Candidates			Transaction ID: H4.4282		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2500.00		0.00		2500.00

<b>C. Full Name (Last, First, Middle Initial)</b> JSM INC			Type of Allocated Activity: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input checked="" type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7 SPRINGS BLVD.			Allocated Activity or Event Year-To-Date 24500.00		
City NEW FORT RICHEY	State FL	Zip Code 34655	Date MM / DD / YYYY 06 / 20 / 2006		
Purpose of Disbursement: Contribution for Federal Candidates			Transaction ID: H4.4283		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2500.00		0.00		2500.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00