

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: <input type="checkbox"/>		Report Filed By: <input type="checkbox"/>		1. CANDIDATE		2. COMMITTEE <input checked="" type="checkbox"/>		3. LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: Haverford Township Republican Campaign Committee											
Street Address: 611 Valley Road											
City: Havertown				State: PA		Zip Code: 19083					
TYPE OF REPORT (place X to the right of report type)	8TH 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. <input checked="" type="checkbox"/>	YEAR	2008		FILING METHOD () CHECK ONE		PAPER	<input checked="" type="checkbox"/>	DISKETTE	
Name of Office Sought by Candidate:					DATE OF ELECTION		District Number	Office Code	Party Code	County Code	
					MO.	DAY	YEAR				
					11	4	2008				
					(SEE INSTRUCTIONS FOR CODES)						
Summary of Receipts and Expenditures from:					MO.	DAY	YEAR	To	MO.	DAY	YEAR
					11	24	2008	To	12	31	2008
A. Amount Brought Forward From Last Report				\$	695.03						
B. Total Monetary Contributions and Receipts (From Schedule I)				\$	0						
C. Total Funds Available (Sum of Lines A and B)				\$	695.03						
D. Total Expenditures (From Schedule III)				\$	562.50						
E. Ending Cash Balance (Subtract Line D from Line C)				\$	132.53						
F. Value of In-Kind Contributions Received (From Schedule II)				\$							
G. Unpaid Debts and Obligations (From Schedule IV)				\$							

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 24 day of Feb

Carol J. Miller Signature
 Notary Seal
 Carol J. Miller, Notary Public
 Media Boro, Delaware County
 My Commission Expires Jan. 4, 2013
 Member, Pennsylvania Association of Notaries

Signature of Person Submitting Report
JAMES KUAPP
 Printed Name

My commission expires 1-4-13
 MO. DAY YR.

610 Area Code **924-9650** 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 _____ day of _____ 20____

Signature of Candidate

Signature

Printed Name

My commission expires _____ MO. DAY YR.

Area Code _____ Daytime Telephone Number _____

Department of State • Bureau of Commissions, Elections and Legislation
 210 North Office Building • Harrisburg, PA 17120-0029 • (717) 787-5280

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate Haverford Township Republican Camp Cse	Reporting Period From 11/24/08 To 12/31/08
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR		
	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 <i>(Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)</i>	\$	0
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SCHEDULE III
STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Haverford Twp Repub Camp Cte.	Reporting Period From 11/24/08 To 12/31/08
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To Whom Paid	MO.	DAY	YEAR	Amount
Pig + Whistle Deli	12	29	08	\$ 562.50
Mailing Address	Description of Expenditure			
City	Invoice for election Day Refreshments			
State	PA 19083			
Zip Code (Plus 4)	-			
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	Description of Expenditure			
State	-			
Zip Code (Plus 4)	-			
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	Description of Expenditure			
State	-			
Zip Code (Plus 4)	-			
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	Description of Expenditure			
State	-			
Zip Code (Plus 4)	-			
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	Description of Expenditure			
State	-			
Zip Code (Plus 4)	-			
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	Description of Expenditure			
State	-			
Zip Code (Plus 4)	-			
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	Description of Expenditure			
State	-			
Zip Code (Plus 4)	-			
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	Description of Expenditure			
State	-			
Zip Code (Plus 4)	-			
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	Description of Expenditure			
State	-			
Zip Code (Plus 4)	-			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. PAGE TOTAL
\$ 562.50