

# 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="text"/>		Report Filed By: <input type="text"/>		1. CANDIDATE <input type="checkbox"/>		2. COMMITTEE <input checked="" type="checkbox"/>		3. LOBBYIST <input type="checkbox"/>		
Name of Filing Committee, Candidate or Lobbyist: <b>HAVERFORD TOWNSHIP REPUBLICAN CAMPAIGN</b>										
Street Address: <b>611 VALLEY RD</b>										
City: <b>HAVERTOWN</b>				State: <b>PA</b>		Zip Code: <b>19083 -</b>				
TYPE OF REPORT  (place X to the right of report type)	5TH 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.	YEAR	2009	FILING METHOD ( ) CHECK ONE		PAPER	DISKETTE		
Name of Office Sought by Candidate:					DATE OF ELECTION		District Number	Office Code	Party Code	County Code
					MO. DAY YEAR <b>11 3 09</b>					
(SEE INSTRUCTIONS FOR CODES)										
Summary of Receipts and Expenditures from:			MO. DAY YEAR <b>11 24 09</b>	To	MO. DAY YEAR <b>12 31 09</b>	FOR OFFICE USE ONLY				
A. Amount Brought Forward From Last Report	\$	619.84				2010 JAN 22 PM 12: 14 COUNTY OF DELAWARE BUREAU OF ELECTIONS				
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	-								
C. Total Funds Available (Sum of Lines A and B)	\$	619.84								
D. Total Expenditures (From Schedule III)	\$	438.12								
E. Ending Cash Balance (Subtract Line D from Line C)	\$	181.72								
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  
22nd day of January 2010  
Joan McNichol  
 Signature

Thomas J. Minunno  
 Signature of Person Submitting Report  
THOMAS J. MINUNNO  
 Printed Name  
610 Area Code 449-6749 Daytime Telephone Number

My commission expires  
 COMMONWEALTH OF PENNSYLVANIA  
 Notarial Seal DAY YR.  
 Joan McNichol, Notary Public  
 Upper Darby Twp., Delaware County

**PART II** - If this is a report of a Candidate, 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  
 My commission expires  
 MO. DAY YR.

\_\_\_\_\_  
 Signature of Candidate  
 \_\_\_\_\_  
 Printed Name  
 \_\_\_\_\_  
 Area Code \_\_\_\_\_ Daytime Telephone Number \_\_\_\_\_

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## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate <b>HAVERFORD TOWNSHIP REPUBLICAN CAMPAIGN</b>	Reporting Period From <b>11-24-09</b> To <b>12-31-09</b>
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To Whom Paid <b>TD BANK</b>	MO. <b>11</b>	DAY <b>30</b>	YEAR <b>09</b>	Amount <b>\$ 25.00</b>
Mailing Address <b>EAGLE RD.</b>		Description of Expenditure <b>MAINTENANCE FEE</b>		
City <b>HAVERTOWN</b>	State <b>PA</b>	Zip Code (Plus 4) <b>19083 -</b>		

To Whom Paid <b>INFO - GRAPHICS SYSTEMS INC</b>	MO. <b>12</b>	DAY <b>1</b>	YEAR <b>09</b>	Amount <b>\$ 371.34</b>
Mailing Address <b>5100 STATE RD SUITE W100</b>		Description of Expenditure <b>T-SHIRTS</b>		
City <b>DREXEL HILL</b>	State <b>PA</b>	Zip Code (Plus 4) <b>19026 -</b>		

To Whom Paid <b>LANERCH DINER</b>	MO. <b>12</b>	DAY <b>14</b>	YEAR <b>09</b>	Amount <b>\$ 16.78</b>
Mailing Address <b>95 E TOWNSHIP LINE RD</b>		Description of Expenditure <b>LUNCH MEETING</b>		
City <b>UPPER DARBY</b>	State <b>PA</b>	Zip Code (Plus 4) <b>19082 -</b>		

To Whom Paid <b>TD BANK</b>	MO. <b>12</b>	DAY <b>31</b>	YEAR <b>10</b>	Amount <b>\$ 25.00</b>
Mailing Address <b>EAGLE RD</b>		Description of Expenditure <b>MAINTENANCE FEE</b>		
City <b>HAVERTOWN</b>	State <b>PA</b>	Zip Code (Plus 4) <b>19083 -</b>		

To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4)		

To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4)		

To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4)		

To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4)		

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL <b>\$ 438.12</b>
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