

COMMONWEALTH OF PENNSYLVANIA
CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report *only* if aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF	CANDIDATE <input checked="" type="checkbox"/>	COMMITTEE <input type="checkbox"/>	LOBBYIST <input type="checkbox"/>						
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST LYNN CASE CRAKER											
STREET ADDRESS 5411 MILLFAIR RD											
FAIRVIEW			STATE PA	ZIP CODE 16415							
TYPE OF REPORT (CHECK ONE)	1. PRE-ELECTION	NAME OF OFFICE SOUGHT BY CANDIDATE TAX COLLECTOR	DISTRICT NO. MILLER	PARTY DEM	DATE OF ELECTION						
	2. 30 DAY PRE-PRIMARY				MO.	DAY	YEAR				
	3. 30 DAY POST-PRIMARY				11	2	2011				
	4. 6TH TUESDAY PRE-ELECTION				FOR OFFICE USE ONLY						
	5. 2ND FRIDAY PRE-ELECTION				CASH BALANCE AT END OF REPORTING PERIOD: \$ 0						
	6. 30 DAY POST-ELECTION				TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ 0						
	7. ANNUAL REPORT <input checked="" type="checkbox"/>				<table border="1"> <tr> <td>AMENDMENT REPORT?</td> <td>YES</td> <td>NO</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>TERMINATION REPORT?</td> <td>YES</td> <td>NO</td> <td><input checked="" type="checkbox"/></td> </tr> </table>			AMENDMENT REPORT?	YES	NO	<input checked="" type="checkbox"/>
AMENDMENT REPORT?	YES	NO	<input checked="" type="checkbox"/>								
TERMINATION REPORT?	YES	NO	<input checked="" type="checkbox"/>								

AFFIDAVIT SECTION

PART I -
 If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.
 If statement is filed on behalf of a Candidate, the Candidate must sign here.
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

Commonwealth of Pennsylvania - Notary Seal
 Judith Zelina, Notary Public

SWORN TO AND SUBSCRIBED BEFORE ME THIS 26 DAY OF JANUARY 2011 My commission expires January 11, 2025
 Signature of Person Submitting Report: Lynn Case Craker
 Commission number: 1212798

Signature: Judith Zelina Member, Pennsylvania Association of Notaries
 Signature: Lynn Case Craker
 MY COMMISSION EXPIRES January 11, 2025 AREA CODE: 814 DAYTIME TELEPHONE NUMBER: 873-6607

PART II -
 If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must 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 26 DAY OF JANUARY 2011
 Signature of Candidate: _____
 Signature: Judith Zelina
 MY COMMISSION EXPIRES Jan AREA CODE: _____ DAYTIME TELEPHONE NUMBER: _____