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SENATE OF PA
SECRETARY'S OFFICE

THE GOVERNOR



COMMONWEALTH OF PENNSYLVANIA
OFFICE OF THE GOVERNOR
HARRISBURG

MEMBER OF THE STATE BOARD OF EDUCATION

January 18, 2012

To the Honorable, the Senate
of the Commonwealth of Pennsylvania:

Please note the nomination dated November 14, 2011, for the appointment Larry A. Wittig, 709 Orchard Road, Andreas 18211, Schuylkill County, Twenty-seventh Senatorial District, for reappointment as a member of the State Board of Education, to serve until October 1, 2017, or until his successor is appointed and qualified, should be corrected to read:

Larry A. Wittig, 709 Orchard Road, Andreas 18211, Schuylkill County, Twenty-ninth Senatorial District, for reappointment as a member of the State Board of Education, to serve until October 1, 2017, or until his successor is appointed and qualified.

STATEMENT OF FINANCIAL INTERESTS

PLEASE PRINT NEATLY

01 LAST NAME FIRST NAME MI SUFFIX
 WIT TIG L A R R Y A

02 ADDRESS 709 Orchard Rd City Address Pa State Zip Code 18211 Area Code (570) Phone 386-2409

NOTE: IF YOU ARE INCLUDING ATTACHMENTS, DO NOT INCLUDE ANYTHING THAT BEARS YOUR SOCIAL SECURITY NUMBER OR FINANCIAL ACCOUNT NUMBERS.

03 STATUS Check applicable block or blocks, more than one block may be marked. (See instructions on page 2)

A Candidate (including write-in) C Public Official (Current) D Public Employee (Current) E Check this block if you are filing as a solicitor

B Nominee C Public Official (Former) D Public Employee (Former)

Check this block if you are amending an original filing

04 PUBLIC POSITION OR PUBLIC OFFICE (administrator, member, Commissioner, job title, etc.) seeking hold held

A STATE BOARD OF EDUCATION seeking hold held

B SCHOOL BOARD MEMBER TAMAQUA

05 GOVERNMENTAL ENTITY in which you are/were an Official, Employee, Candidate or Nominee (e.g., dept, agency, authority, borough, board, commission, county, school district, twp, etc.)

A PA DEPT OF EDUCATION

B TAMAQUA AREA SCHOOL DISTRICT

06 OCCUPATION OR PROFESSION (This may be the same as block 4) CPA

07 YEAR The information in blocks 8 through 15 below represents financial interests for the PRIOR calendar year indicated: 2011

08 REAL ESTATE INTERESTS (See instructions on page 2) If NONE, check this box.

09 CREDITORS (See instructions on page 2) (Name and Address) If NONE, check this box.

Name: Bank of America, PO Box 45224, Jacksonville, FL 32232 Interest Rate 3.89%

Name: Met Bank Broad & Ctr Sts, Tamaqua, PA 18252 Interest Rate 5.5%

Name: CIOCH FCU 1800 W. Market St, Pottsville, PA Interest Rate 4.75%

Name: PNC Bank, Pottsville, PA Interest Rate 6%

10 DIRECT OR INDIRECT SOURCES OF INCOME including (but not limited to) all employment. (See instructions on pg. 2) ONLY IF NONE, check this box. (OFFICIAL USE ONLY)

Name: TTR Inc } 244 E Broad St, Tamaqua, PA 18252

Name: EAC Inc } 244 E Broad St, Tamaqua, PA 18252

Name: WITtig class } Met Bank Broad & Ctr Sts, Tamaqua, PA

11 GIFTS (See instructions on page 2) If NONE, check this box.

Source of Gift

Address of Source of Gift

Circumstances (including description) of Gift

Value of Gift

12 TRANSPORTATION, LODGING, HOSPITALITY (See instructions on page 2) If NONE, check this box.

Source (Name and Address)

Value

13 OFFICE, DIRECTORSHIP OR EMPLOYMENT IN ANY BUSINESS (See instructions on page 2) If NONE, check this box.

Business Entity (Name and Address)

Name: TTR Inc } President } 244 E Broad St, Tamaqua, PA 18252

Name: EAC Inc } 244 E Broad St, Tamaqua, PA 18252

Position Held

14 FINANCIAL INTEREST IN ANY LEGAL ENTITY IN BUSINESS FOR PROFIT (See instructions on page 2) If NONE, check this box.

Name and Address of Business

Name: EAC Inc } 244 E Broad St, Tamaqua, PA 18252 Interest Held 7.5%

Name: TTR Inc } 244 E Broad St, Tamaqua, PA 18252 Interest Held 6%

15 BUSINESS INTERESTS TRANSFERRED TO IMMEDIATE FAMILY MEMBER (See instructions on page 2) If NONE, check this box.

Business (Name and Address)

Transferee (Name and Address)

Relationship

Date Transferred

The undersigned hereby affirms that the foregoing information is true and correct to the best of said person's knowledge, information and belief; said affirmation being made subject to the penalties prescribed by 18 Pa.C.S. §490 (unsworn falsification to authorities) and the Public Official and Employee Ethics Act, 65 Pa.C.S. §1109(b).

Signature Larry Witting Enter Current Date 1/17/12

THIS FORM IS CONSIDERED DEFICIENT IF ANY BLOCK ABOVE IS NOT COMPLETED. MAKE A COPY FOR YOUR RECORDS.

RECEIVED
JAN 20 11 4:33 AM '12
STATE ETHICS COMMISSION
SECRETARY'S OFFICE