

# Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

<b>Filer Identification Number :</b> 8400088		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>									
<b>Name of Filing Committee, Candidate or Lobbyist:</b> VOLUNTEERS FOR ARGALL																	
<b>Street Address:</b> P.O. BOX 241																	
<b>City:</b> TAMAQUA					<b>State:</b> PA		<b>Zip Code:</b> 18252										
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-	3. X	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>						
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>						
	ANNUAL REPORT	7.	Year 2014	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>		<b>DISKETTE</b>								
<b>Name of Office Sought by Candidate:</b>					<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>						
SENATOR IN THE GENERAL ASSEMBLY					<table border="1"> <tr> <th>MO</th> <th>DAY</th> <th>YEAR</th> </tr> <tr> <td>11</td> <td>4</td> <td>2014</td> </tr> </table>			MO	DAY	YEAR	11	4	2014	29	STS	REP	54
MO	DAY	YEAR															
11	4	2014															
								(SEE INSTRUCTIONS FOR CODES)									
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>							
		5	6	2014			6	9	2014								
<b>A. Amount Brought Forward From Last Report</b>					\$ 119,679.25												
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>					\$ 16,355.00												
<b>C. Total Funds Available (Sum Of Lines A and B)</b>					\$ 136,034.25												
<b>D. Total Expenditures (From Schedule III)</b>					\$ 3,670.87												
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>					\$ 132,363.38												
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>					\$ 0.00												
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>					\$ 0.00												

## 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 filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code 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

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
VOLUNTEERS FOR ARGALL	From: <u>5/6/2014</u> To: <u>6/9/2014</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 635.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 250.00
<b>All Other Contributions (Part B)</b>	\$ 4,570.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 4,820.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 3,500.00
<b>All Other Contributions (Part D)</b>	\$ 7,400.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 10,900.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)</b>	\$ 16,355.00
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# PART A

## CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

**\$50.01 TO \$250.00**

**Use this Part to itemize only contributions received from political committees  
with an aggregate value from \$50.01 to \$250.00 in the reporting period.**

<b>Name of Filing Committee or Candidate</b>  VOLUNTEERS FOR ARGALL	<b>Reporting Period</b>  From: <u>5/6/2014</u> To: <u>6/9/2014</u>
<div style="display: flex; justify-content: space-between;"> <span><b>DATE</b></span> <span><b>AMOUNT</b></span> </div>	

<b>Full Name of Contributing Committee</b> PA MEDICAL PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> P.O BOX 8820			6	5	2014	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17105				

**Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.**

<b>PAGE TOTAL</b>
\$ 250.00

## PART B ALL OTHER CONTRIBUTIONS

**\$50.01 TO \$250.00**

**Use this Part to itemize all other contributions with an aggregate value from  
\$50.01 to \$250.00 in the reporting period.  
(Exclude contributions from political committees reported in Part A)**

<b>Name of Filing Committee or Candidate</b> VOLUNTEERS FOR ARGALL	<b>Reporting Period</b> <b>From:</b> <u>5/6/2014</u> <b>To:</b> <u>6/9/2014</u>
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				DATE		AMOUNT	
Full Name of Contributor MORGAN PLANT & ASSOCIATEES				MO	DAY	YEAR	\$ 250.00
Mailing Address 322 S. WEST STREET				6	5	2014	
City CARLISLE	State PA	Zip Code (Plus 4) 170133853					
Full Name of Contributor MOHAMMED ASLAM				MO	DAY	YEAR	\$ 250.00
Mailing Address 50 ZERBE ST.				6	5	2014	
City CRESSONA	State PA	Zip Code (Plus 4) 17929					
Full Name of Contributor LYNN TUCCIARELLI BALL				MO	DAY	YEAR	\$ 200.00
Mailing Address UNKNOWN				6	5	2014	
City SCRANTOM	State PA	Zip Code (Plus 4) 000000000					
Full Name of Contributor PAUL BEDWAY				MO	DAY	YEAR	\$ 200.00
Mailing Address 398 E LIBERTY ST				6	5	2014	
City SCHUYLKILL HAVEN	State PA	Zip Code (Plus 4) 17972					
Full Name of Contributor JAMES & MARY BETH BOHRI				MO	DAY	YEAR	\$ 100.00
Mailing Address 5266 CREEKVIEW DR				6	5	2014	
City OREFIELD	State PA	Zip Code (Plus 4) 18069					
Full Name of Contributor ROBERT D BRICKER				MO	DAY	YEAR	\$ 250.00
Mailing Address 404 CONCORD GREEN				6	5	2014	
City POTTSVILLE	State PA	Zip Code (Plus 4) 179014046					

Full Name of Contributor MARTY & SANDY CHRISTMAN			MO	DAY	YEAR	\$ 100.00
Mailing Address 551 N FOURTH STREET			6	5	2014	
City HAMBURG	State PA	Zip Code (Plus 4) 19526				
Full Name of Contributor JAMES J CLYMER			MO	DAY	YEAR	\$ 100.00
Mailing Address 106 DOE LANE			6	5	2014	
City KENNETT SQUARE	State PA	Zip Code (Plus 4) 19348				
Full Name of Contributor KALMEN FEINBERG			MO	DAY	YEAR	\$ 100.00
Mailing Address 46 DEVON DR			6	5	2014	
City READING	State PA	Zip Code (Plus 4) 19606				
Full Name of Contributor KENNETH L FULMER			MO	DAY	YEAR	\$ 100.00
Mailing Address 28 CHURCH HILL ROAD			6	5	2014	
City FLEETWOOD	State PA	Zip Code (Plus 4) 19522				
Full Name of Contributor JAMES GILMARTIN			MO	DAY	YEAR	\$ 100.00
Mailing Address 706 CRESCENT AVE			6	5	2014	
City HAMBURG	State PA	Zip Code (Plus 4) 19526				
Full Name of Contributor ROBERT & DIANE GREENE			MO	DAY	YEAR	\$ 250.00
Mailing Address 11 JAN AARDEN DRIVE			6	5	2014	
City SCHUYLKILL HAVEN	State PA	Zip Code (Plus 4) 17972				
Full Name of Contributor BARBARA KOCH HILL			MO	DAY	YEAR	\$ 70.00
Mailing Address 15 KETTLE ROAD			6	5	2014	
City TAMAQUA	State PA	Zip Code (Plus 4) 18252				
Full Name of Contributor DAVID HUNSBERGER			MO	DAY	YEAR	\$ 100.00
Mailing Address PO BOX 28			6	5	2014	
City BLANDON	State PA	Zip Code (Plus 4) 19510				
Full Name of Contributor JOHN KWEDER			MO	DAY	YEAR	\$ 100.00
Mailing Address 67 DEER TRAIL LANE			6	5	2014	
City NESQUEHONING	State PA	Zip Code (Plus 4) 18240				

Full Name of Contributor LEO LIVENGOD			MO	DAY	YEAR	\$ 250.00
Mailing Address 4451 LEHIGH DRIVE			6	5	2014	
City WALNUTPORT	State PA	Zip Code (Plus 4) 18088				
Full Name of Contributor BOB LUDGATE			MO	DAY	YEAR	\$ 100.00
Mailing Address 220 PARK ROAD NORTH			6	5	2014	
City WYOMISSING	State PA	Zip Code (Plus 4) 19610				
Full Name of Contributor SOLOMON LUO			MO	DAY	YEAR	\$ 250.00
Mailing Address 350 PATTON DRIVE			6	5	2014	
City ORWIGSBURG	State PA	Zip Code (Plus 4) 17961				
Full Name of Contributor RICHARD MABLE			MO	DAY	YEAR	\$ 150.00
Mailing Address 2921 DUFFIELD LANE			6	5	2014	
City SINKING SPRING	State PA	Zip Code (Plus 4) 19608				
Full Name of Contributor KEITH E. MASSER			MO	DAY	YEAR	\$ 250.00
Mailing Address 19 SPUD LANE			6	5	2014	
City SACRAMENTO	State PA	Zip Code (Plus 4) 17968				
Full Name of Contributor DWIGHT L. MOYER. JR.			MO	DAY	YEAR	\$ 100.00
Mailing Address 435 W. CENTRE STREET			6	5	2014	
City ASHLAND	State PA	Zip Code (Plus 4) 17921				
Full Name of Contributor GEORGE MOYER			MO	DAY	YEAR	\$ 100.00
Mailing Address 122 EVERGREEN DRIVE			6	5	2014	
City POTTSVILLE	State PA	Zip Code (Plus 4) 17901				
Full Name of Contributor RICHARD REIDLER			MO	DAY	YEAR	\$ 100.00
Mailing Address P O BOX 555			6	5	2014	
City POTTSVILLE	State PA	Zip Code (Plus 4) 17901				
Full Name of Contributor ATTY. PASCO SCHIAVO			MO	DAY	YEAR	\$ 250.00
Mailing Address 139 N. VINE STREET			6	5	2014	
City HAZLETON	State PA	Zip Code (Plus 4) 18201				

Full Name of Contributor ROBERT SELTZER, JR.			MO	DAY	YEAR	\$ 250.00
Mailing Address 580 S LIBERTY STREET			6	5	2014	
City ORWIGSBURG	State PA	Zip Code (Plus 4) 17961				

Full Name of Contributor JOHN SIMODEJKA			MO	DAY	YEAR	\$ 100.00
Mailing Address 2 COTTAGE HILL WEST			6	5	2014	
City POTTSVILLE	State PA	Zip Code (Plus 4) 17901				

Full Name of Contributor ADOLPH SLOVIK			MO	DAY	YEAR	\$ 100.00
Mailing Address 33 S. HANCOCK STREET			6	5	2014	
City MCADOO	State PA	Zip Code (Plus 4) 18237				

Full Name of Contributor RICHARD TAYLOR			MO	DAY	YEAR	\$ 100.00
Mailing Address 490W COUNTY RD			6	5	2014	
City SUGARLOAF	State PA	Zip Code (Plus 4) 18249				

Full Name of Contributor MARSHALL WALTERS			MO	DAY	YEAR	\$ 200.00
Mailing Address 228 CARNATION LN.			6	5	2014	
City LEHIGHTON	State PA	Zip Code (Plus 4) 18235				

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

**PAGE TOTAL**

\$ 4,570.00

# PART C

## Contributions Received From Political Committees

### OVER \$250.00

**Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.**

<b>Name of Filing Committee or Candidate</b>  VOLUNTEERS FOR ARGALL	<b>Reporting Period</b>  <b>From:</b> <u>5/6/2014</u> <b>To:</b> <u>6/9/2014</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee GREENLEE PARTNERS PAC				MO 6	DAY 5	YEAR 2014	\$ 500.00
Mailing Address   P.O. BOX 11972							
City   HARRISBURG	State PA	Zip Code (Plus 4) 17108					
Full Name of Contributing Committee LAWPAC				MO 6	DAY 5	YEAR 2014	\$ 500.00
Mailing Address   800 NORTH THIRD STREET							
City   HARRISBURG	State PA	Zip Code (Plus 4) 17102					
Full Name of Contributing Committee NATIONWIDE PA PAC				MO 6	DAY 5	YEAR 2014	\$ 500.00
Mailing Address   1 NATIONWIDE PLAZA							
City   COLUMBUS	State OH	Zip Code (Plus 4) 43216					
Full Name of Contributing Committee PA CHIROPRACTIC ASSOCIATION PAC				MO 6	DAY 5	YEAR 2014	\$ 250.00
Mailing Address   1335 N. FRONT ST							
City   HARRISBURG	State PA	Zip Code (Plus 4) 17102					
Full Name of Contributing Committee PA CHIROPRACTIC ASSOCIATION PAC				MO 6	DAY 5	YEAR 2014	\$ 250.00
Mailing Address   1335 N. FRONT ST							
City   HARRISBURG	State PA	Zip Code (Plus 4) 17102					
Full Name of Contributing Committee PA CHIROPRACTIC ASSOCIATION PAC				MO 6	DAY 5	YEAR 2014	\$ 500.00
Mailing Address   1335 N. FRONT ST							
City   HARRISBURG	State PA	Zip Code (Plus 4) 17102					



Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
PPL PEOPLE FOR GOOD GOVERNMENT PAC						
Mailing Address 2 NORTH 9TH STREET			6	5	2014	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18101				

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
VALUE DRUG CO. PAC			6	5	2014	
Mailing Address P.O. BOX 2448 1 GOLFVIEW DRIVE						
City	ALTOONA	State	PA	Zip Code (Plus 4)	16603	

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

<p><b>PAGE TOTAL</b></p> <p>\$ 3,500.00</p>
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**PART D**  
**ALL OTHER CONTRIBUTIONS**  
**OVER \$250.00**

**Use this Part to itemize all other contributions with an aggregate value of  
over \$250.00 in the reporting period.  
(Exclude contributions from political committees reported in Part C.)**

<b>Name of Filing Committee or Candidate</b>  VOLUNTEERS FOR ARGALL	<b>Reporting Period</b>  <b>From:</b> <u>5/6/2014</u> <b>To:</b> <u>6/9/2014</u>
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				DATE	AMOUNT		
<b>Full Name of Contributor</b> CAPITAL BLUEPAC				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 500.00
<b>Mailing Address</b> PO BOX 60710				6	5	2014	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 171060710					
<b>Employer Name</b>				<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>		<b>State</b>	<b>Zip Code (Plus 4)</b>	
<b>Full Name of Contributor</b> ALBERT EVANS				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 500.00
<b>Mailing Address</b> P.O. BOX 268				6	5	2014	
<b>City</b> POTTSVILLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17901					
<b>Employer Name</b> EVANS DELIVERY				<b>Occupation</b> TRUCK DRIVER			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>		<b>State</b>	<b>Zip Code (Plus 4)</b>	
100 COLUMBIA ST			SCHUYLKILL HAVEN		PA	17972	
<b>Full Name of Contributor</b> MARK FLUDGATE				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 500.00
<b>Mailing Address</b> 385 DEER LN.				6	5	2014	
<b>City</b> LEHIGHTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18235					
<b>Employer Name</b>				<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>		<b>State</b>	<b>Zip Code (Plus 4)</b>	
					PA		
<b>Full Name of Contributor</b> KEN HUEBNER				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> PO BOX 279				6	5	2014	
<b>City</b> ST. CLAIR	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17970					
<b>Employer Name</b> MOUNTAIN VALLEY GOLF COURSE				<b>Occupation</b> VICE PRESIDENT			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>		<b>State</b>	<b>Zip Code (Plus 4)</b>	
BROCKTON MOUNTAIN ROAD			BARNESVILLE		PA	18214	

<b>Full Name of Contributor</b> MERLYN JENKINS				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 500.00
<b>Mailing Address</b> 410 W MARKET STREET				6	5	2014	
<b>City</b> POTTSVILLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17901					
<b>Employer Name</b> JENKINS ASSOCIATES				<b>Occupation</b> SURVEYOR			
<b>Employer Mailing Address/Principal Place of Business</b> 412 W. MARKET ST.			<b>City</b> POTTSVILLE		<b>State</b> PA		<b>Zip Code (Plus 4)</b> 17901

  

<b>Full Name of Contributor</b> EUGENE LAIGON				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 300.00
<b>Mailing Address</b> 135 EAST RIDGE STREET				6	5	2014	
<b>City</b> COALDALE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18218					
<b>Employer Name</b>				<b>Occupation</b> RETIRED			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>		<b>State</b> PA		<b>Zip Code (Plus 4)</b>

  

<b>Full Name of Contributor</b> VICKI MACKIN				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 300.00
<b>Mailing Address</b> 1 GREEN ACRES				6	5	2014	
<b>City</b> MCADOO	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18237					
<b>Employer Name</b>				<b>Occupation</b> RETIRED			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>		<b>State</b>		<b>Zip Code (Plus 4)</b>

  

<b>Full Name of Contributor</b> ANDREW MULLER, JR.				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> 16 SNOWDRIFT DRIVE				6	5	2014	
<b>City</b> KUTZTOWN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19530					
<b>Employer Name</b> READING BLUE MTN & NORTHERN RR				<b>Occupation</b> PRESIDENT			
<b>Employer Mailing Address/Principal Place of Business</b> P.O. BOX 218			<b>City</b> PORT CLINTON		<b>State</b> PA		<b>Zip Code (Plus 4)</b> 19549

  

<b>Full Name of Contributor</b> LOUIS SPORTELLI				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 500.00
<b>Mailing Address</b> 125 DELAWARE AVE				6	5	2014	
<b>City</b> PALMERTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18071					
<b>Employer Name</b> DR. LOUIS SPORTELI				<b>Occupation</b> DOCTOR			
<b>Employer Mailing Address/Principal Place of Business</b> 125 DELAWARE AVE			<b>City</b> PALMERTON		<b>State</b> PA		<b>Zip Code (Plus 4)</b> 18071

  

<b>Full Name of Contributor</b> BROCK STEIN				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 300.00
<b>Mailing Address</b> 9 KETTLE RD.				6	5	2014	
<b>City</b> TAMAQUA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18252					
<b>Employer Name</b>				<b>Occupation</b> STUDENT			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>		<b>State</b> PA		<b>Zip Code (Plus 4)</b>

<b>Full Name of Contributor</b> LORI VAN HOEKELEN				<b>MO</b> 6	<b>DAY</b> 5	<b>YEAR</b> 2014	<b>\$</b> 1,000.00
<b>Mailing Address</b> 34 N GRECO DR				6	5	2014	
<b>City</b> DRUMS	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18222					
<b>Employer Name</b> VAN HOEKELEN GREENHOUSE				<b>Occupation</b> OWNER			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b> MCADOO	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18237		

  

<b>Full Name of Contributor</b> DICK YUENGLING				<b>MO</b> 6	<b>DAY</b> 5	<b>YEAR</b> 2014	<b>\$</b> 1,000.00
<b>Mailing Address</b> 124 S. 26TH ST.				6	5	2014	
<b>City</b> POTTSVILLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17901					
<b>Employer Name</b> YUENGLING BREWERY				<b>Occupation</b> EXECUTIVE			
<b>Employer Mailing Address/Principal Place of Business</b> MAHANTONGO ST			<b>City</b> POTTSVILLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17901		

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

<b>PAGE TOTAL</b>
<b>\$</b> 7,400.00

## PART E OTHER RECEIPTS

**REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.**

**Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.**

Name of Filing Committee or Candidate	Reporting Period  From: <span style="float: right;">To:</span>
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				DATE	AMOUNT		
Full Name				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Receipt Description							

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

<b>PAGE TOTAL</b>
\$ 0.00

## SCHEDULE II

**IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED**

**USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS  
DURING THE REPORTING PERIOD.**

**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
VOLUNTEERS FOR ARGALL		From: <u>5/6/2014</u> To: <u>6/9/2014</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period		(3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 0.00

**SCHEDULE II**  
**PART F**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OF \$50.01 TO \$250.00**

Name of Filing Committee or Candidate	Reporting Period  From: <span style="float: right;">To:</span>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						<b>PAGE TOTAL</b>  \$ 0.00

**SCHEDULE II**  
**PART G**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OVER \$250.00**

Name of Filing Committee or Candidate	Reporting Period
	From: To:

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	



# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
VOLUNTEERS FOR ARGALL	From <u>5/6/2014</u> To: <u>6/9/2014</u>

DATE				AMOUNT
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
US POSTMASTER				
<b>Mailing Address</b> 399 EAST BROAD STREET	5	14	2014	\$ 294.00
<b>City</b> TAMAQUA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18252	<b>Description of Expenditure</b> POSTAGE	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
DAVID ARGALL				
<b>Mailing Address</b> 106 LAKE DRIVE	5	15	2014	\$ 28.04
<b>City</b> NESQUEHONING	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18240	<b>Description of Expenditure</b> REIMBURSEMENT	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
DAVID ARGALL				
<b>Mailing Address</b> 106 LAKE DRIVE	5	15	2014	\$ 519.12
<b>City</b> NESQUEHONING	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18240	<b>Description of Expenditure</b> MILEAGE	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
JOANNE MYERS				
<b>Mailing Address</b> 158 PENN STREET	5	15	2014	\$ 100.00
<b>City</b> TAMAQUA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18252	<b>Description of Expenditure</b> EXPENSES	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
BERKS COUNTY REPUBLICAN CMTE.				
<b>Mailing Address</b> 529 READING AVENUE SUITE D	5	15	2014	\$ 200.00
<b>City</b> READING	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19611	<b>Description of Expenditure</b> TICKETS	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
ATLANTIC BINGO SUPPLY, INC.				
<b>Mailing Address</b> 500 S. CENTRE STREET	5	16	2014	\$ 79.50
<b>City</b> POTTSVILLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17901	<b>Description of Expenditure</b> SUPPLIES	

To Whom Paid			MO	DAY	YEAR	\$ 100.00
BOB AMES						
Mailing Address 129 SECOND ST			5	19	2014	
City COALDALE	State PA	Zip Code (Plus 4) 18218	Description of Expenditure TICKETS			
To Whom Paid			MO	DAY	YEAR	\$ 136.95
CHRISTINE VERDIER						
Mailing Address 69 SUNNY DR PO BOX 74			5	20	2014	
City MARY D	State PA	Zip Code (Plus 4) 17952	Description of Expenditure REIMBURSEMENT			
To Whom Paid			MO	DAY	YEAR	\$ 650.10
MOUNTAIN VALLEY						
Mailing Address PO BOX 279			5	22	2014	
City ST. CLAIR	State PA	Zip Code (Plus 4) 17970	Description of Expenditure RECEPTION			
To Whom Paid			MO	DAY	YEAR	\$ 5.00
LINDA FETTER						
Mailing Address 24 3RD AVE.			6	5	2014	
City BARNESVILLE	State PA	Zip Code (Plus 4) 18214	Description of Expenditure REIMBURSEMENT			
To Whom Paid			MO	DAY	YEAR	\$ 173.37
KLINGAMAN'S						
Mailing Address 124 E. BROAD STREET			6	5	2014	
City TAMAQUA	State PA	Zip Code (Plus 4) 18252	Description of Expenditure SUPPLIES			
To Whom Paid			MO	DAY	YEAR	\$ 36.76
KLINGAMAN'S						
Mailing Address 124 E. BROAD STREET			6	5	2014	
City TAMAQUA	State PA	Zip Code (Plus 4) 18252	Description of Expenditure SUPPLIES			
To Whom Paid			MO	DAY	YEAR	\$ 500.00
LN CONSULTING						
Mailing Address 121 STATE ST.			6	5	2014	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure CONSULTING			
To Whom Paid			MO	DAY	YEAR	\$ 9.95
PENTELEDA						
Mailing Address PO BOX 401			6	5	2014	
City PALMERTON	State PA	Zip Code (Plus 4) 18071	Description of Expenditure INTERNET			

<b>To Whom Paid</b> SCHUYLKILL COUNTRY CLUB			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 297.97
<b>Mailing Address</b> PO BOX 316			6	5	2014	
<b>City</b> ORWIGSBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17961	<b>Description of Expenditure</b> RECEPTION			

  

<b>To Whom Paid</b> VISA			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 540.11
<b>Mailing Address</b> P.O. BOX 82519			6	5	2014	
<b>City</b> LINCOLN	<b>State</b> NE	<b>Zip Code (Plus 4)</b> 68501	<b>Description of Expenditure</b> CAMPAIGN EXPENSES			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						<b>\$</b> 3,670.87

