Campaign Finance Report

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

Filer Identificati Number :	on	20194	•				port ed B		CAN	IDI	DATE	\	C	OMMITTE		LOB	BYIST		
Name of Filing C	ommittee, C	andida	te or Lo	bbyist:		ARC	GALL	, DAV	/ID G.										
Street Address:																			
City:									State	:				Zip Cod	e: 18	634-0	000		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1.	2ND FRII PRIMARY		≣-	2.	30 DA		P			AMENDMI REPORT?	ENT	Yes	N	0	\	
(place X to the right of	6TH TUESDA' PRE-ELECTIO		4.	2ND FRI		E-	5.	30 DA		P	OST-	6.		TERMINATEPORT?	TION	Yes	N	0	/
report type)	ANNUAL RE	PORT	7.	Year 20	02				NG MET					PAPER		√	DISK	ETTE	
Name of Office S	ought by Ca	ndidate	e:			•			DATE	O	F ELE	СТІ	ON	District Number	Office Code	Par	ty Cod	Code	
REPRESENTATI	VE IN THE G	GENER <i>!</i>	AL ASSI	EMBLY					МО		DAY		YEAR	124	STH	REF	•	54	
										11		5	2002		(SEE INS				5)
Summary of Expenditures		nd	МО	DAY	YEA	R 1	١,	0	МО		DAY		YEAR		R OFFIC	E USE	ONLY	•	
A. Amount Bro	ught Forward	d From	l ast Re				•	*		6		10	0.00	4					
B. Total Moneta				-	om Sch	edule	e I)	\$					731.05	4					
C. Total Funds	Available (S	um Of I	ines A	and B)				\$					731.05						
D. Total Expend	ditures (Fron	m Sche	dule III	:)				\$					731.05	1					
E. Ending Cash	Balance (Su	ıbtract [Line D	From Lin	e C)			\$					0.00						
F. Value Of In-	Kind Contrib	utions	Receive	ed (From	Sched	ıle II	I)	\$					0.00						
G. Unpaid Debt	s And Obliga	ations (From S	chedule	IV)			\$					0.00						
					AFI	FIDA	AVI	T SE	CTIO	Ν									
PART I - If this is	a Committe	e repo	rt, trea	surer sig	n here.	If th	nis is	a Car	ndidate	e re	port, c	cano	didate si	gn here.					
I swear (or affirm) correct and comple		ort, inclu	ding the	attached	schedule	s file	d on	paper	or by el	ectr	onic m	ediu	m, are to	the best of	my knov	vledge	and be	lief , tr	ue
Sworn to and subs	cribed before i	me this		20						•			Signatur	e of Person	Submitt	ing Re	ort		_
	- <u> </u>	Signature	e	_				- -		•				Print	ed Name				_
My Commission Ex	rpires							_		-				Email					
	МО		DA	·Υ	YF	ł					Are	ea C	ode	Daytime	Teleph	one Nu	mber		
Part II- If this is	a report of	a candi	date's a	authoriz	ed Com	mitte	ee, C	andid	ate sh	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		est of my	/ knowle	dge and b	elief thi	s poli	tical	comm	ittee ha	s no	ot viola	ted a	any provis	sions of the	act of Ju	ine 3,1	937 (P.	L. 133	з,
Sworn to and subsc	ribed before m	ne this											5	Signature of	f Candida	ite			_
								-						Printed	l Name				-
My Commission Exp	_	nature						-		-				Email	I				-
,								_											_
	М	40	DA	Υ	Y	R					Area	Cod	e	Da	ytime Te	elephor	e Num	ber	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
ARGALL, DAVID G.	From:	То:	6/10/2002
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			
TOTAL for the Reporting	Period (1)	\$	0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)			
Contributions Received From Political Committees (Part A)		\$	0.00
All Other Contributions (Part B)		\$	0.00
TOTAL for the Reporting) Period (2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)			
Contributions Received From Political Committees (Part C)		\$	731.05
All Other Contributions (Part D)		\$	0.00
TOTAL for the Reporting	Period (3)	\$	731.05
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)			
TOTAL for the Reporting	Period (4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa		\$	731.05

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.

Name of Filing Committee or Candida	te		Reporting	Period			
			From:		То	:	
				DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

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.

Name of Filing Committ	tee or Candidate		Reporti	ng P	eriod			
			From:			To):	
		·			DATE			AMOUNT
Full Name of Contributor			М	0	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
	•					_		

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

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.

Name of Filing Committee or Candidate			Reporting	Period				
ARGALL, DAVID G.			From:			То:	6/10/2002	
				DA	TE		AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR		
VOLUNTEERS FOR ARGALL							\$ 500.	.00
Mailing Address PO BOX 241				6	10	2002		
City TAMAQUA	State	Zip Cod	e (Plus 4)		"	2002		
	PA	18252						
Full Name of Contributing Committee				мо	DAY	YEAR		
VOLUNTEERS FOR ARGALL					5711		\$ 231.	.05
Mailing Address PO BOX 241				5	13	2002		
City TAMAQUA	State	Zip Cod	e (Plus 4)			2002		
	PA	18252						

 $\label{lem:enter-constraint} \textbf{Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.}$

PAGE TOTAL \$ 731.05

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.)

Name of Filing Committee or Candidate	2			Rep	orting Pe	riod			
				Fror	n:		To) :	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address								7	
City	State	Zi	p Code (Plus	s 4)					
Employer Name	•				Occupa	tion	-	-	
Employer Mailing Address/Principal Pl	ace of Business		City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumr	mary Page,	Section	on 3.				PAGE TOTAL
								\$	0.00

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		Report	ing Peri	od			
			From:			To:		
				E	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Pl	us 4)					
Receipt Description	'							
Futor Count Total of Dout	Fan Cahadula I Datailad	I Company Dome C	` !	4			ı	PAGE TOTAL
Enter Grand Total of Part	e on Schedule 1, Detailed	i Summary Page, S	ection	4.			\$	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

Name of Filing Committee or Candidate	Reporting Period		
ARGALL, DAVID G.	From:	To:	6/10/2002
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candid	ate		Reportin	g Period			
			From:			To:	
		•		DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						7 \$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:	•	-	•	•		•	
Enter Grand Total of Part F on S	chedule II, In-Ki	nd Contributions Detai	led Sum	mary Pag	ge,		PAGE TOTAL
Section 2.						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi _l	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

731.05

STATEMENT OF EXPENDITURES

Name of Filing Committee or Car	ndidate		Reporti	ng Period			
ARGALL, DAVID G.			From			То:	6/10/2002
		l		DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
DAVID G. ARGALL							
Mailing Address PO BOX 241			5	13	2002	\$	231.05
City TAMAQUA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	18252	MILEAG	SE .			
To Whom Paid			мо	DAY	YEAR		
OLD CITY HALL			140		ILAK		
Mailing Address 423 WALNUT	ST		6	10	2002	\$	500.00
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	17101	CAMPA	IGN OFFICI	=/STORA	GE RENTA	NL
Enter Grand Total of Expendi	tures on Page 1, Re	port Cover Page, Item D).				PAGE TOTAL