### **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	20160	0258				Repo Filed		:	CA	NDII	DATE	*	<b>′</b> C	ОММІТ	ΓEE		LOBI	BYIS.	Г	
Name of Filing C	Committee, C	andida	te or Lo	bbyist	t:		DAVID	G.	AR	GALL											
Street Address:	Street Address:																				
City:	_									State	e:				Zip C	ode	: 18	240			
TYPE OF REPORT	6TH TUESDA' PRE-PRIMAR'		1.	2ND F PRIMA		PRE-	2.		DA RIMA		Р	OST-	3.		AMENI REPOR		NT	Yes		No	<b>\</b>
(place X to the right of	6TH TUESDA' PRE-ELECTIC		4.	2ND F ELECT		PRE-	5.		DA ECT	Y ION	Р	OST-	6.		TERMI REPOR		TION	Yes		No	<b>\</b>
report type)	ANNUAL RE	PORT	7. <b>X</b>	Year 2	2016					IG ME					PAPEI	₹		<b>\</b>	DIS	KETTE	
Name of Office S	Sought by Ca	ındidate	 e:				-			DAT	ΕO	F ELE	CT	ON	Distric Numb		Office Code	Par	ty Co	de Cou	
										МО		DAY		YEAR	29		STS	REF	1		
SENATOR IN TH	HE GENERAL	_ ASSEI	MBLY								11		8	2016			(SEE INS	TRUCTI	ONS FO	R CODE	S)
Summary of	•	nd	МО	DAY	Y	YEAR				МО		DAY		YEAR		FOR	OFFIC	E USE	ONL	Υ	
Expenditures	from:		1	11	29	20	16	то			12		31	201	5						
A. Amount Bro	ught Forwar	d From	Last Ro	eport					\$					0.00							
B. Total Monet	ary Contribu	tions A	nd Rece	eipts (	From	Sched	lule I)	)	\$					547.72	2						
C. Total Funds	Available (S	um Of I	Lines A	and B	)				\$					547.72	2						
D. Total Expend	ditures (Fror	m Sche	dule III	[)					\$					547.72							
E. Ending Cash	Balance (Su	ıbtract	Line D	From L	Line C	<b>:</b> )			\$					0.00							
F. Value Of In-	Kind Contrib	utions	Receive	ed (Fro	om Sc	hedule	e II)		\$					0.00	_						
G. Unpaid Debt	ts And Obliga	ations (	From S	chedu	le IV	)			\$					0.00			'				
						AFFI	DAV	IT S	SE	CTIC	NC										
PART I - If this is		-	•									-			_						
I swear (or affirm) correct and comple		ort, inclu	ding the	attach	ed sch	edules	filed o	n pap	per o	or by e	electr	ronic m	ediu	ım, are to	the best	of I	my know	/ledge	and b	elief , t	rue
Sworn to and subs	cribed before of	me this		20										Signatu	re of Per	son	Submitt	ing Rep	ort		
	- <u> </u>	Signature						_							Pı	inte	ed Name				_
My Commission Ex											•				En	nail					_
	мо		DA	λY		YR						Ar	ea C	ode	Dayt	ime	Telepho	one Nu	mber		
Part II- If this is	a report of	a candi	date's	author	ized	Commi	ittee,	Can	dida	ate si	nall s	sign h	ere.								
I swear (or affirm) No 320) as amende		est of my	y knowle	dge an	d belie	ef this p	politica	ıl coı	mmi	ittee h	as no	ot viola	ted	any provi	sions of	the	act of Ju	ne 3,1	937 (1	P.L. 133	33,
Sworn to and subsc		ne this													Signatur	e of	Candida	te			-
	day of —— —							_							Prir	ited	Name				-
	Sign	nature						_													_
My Commission Exp	oires														En	nail					
		мо	DA	ΑY		YR						Area	Cod	le		Day	rtime Te	lephor	e Nui	nber	_

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
DAVID G. ARGALL	From:	11/29/201	<u>б</u> То:	12/31/2016
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)			\$	547.72
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	) Period	(3)	\$	547.72
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			\$	547.72

**PAGE TOTAL** 

0.00

#### **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 Candidat	e	'	Reporting	Period			
		F	From:		То	:	
				DATE			AMOUNT
Full Name of Contributing Committee			МО	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. \$

## 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)

Name of Filing Committee or Candidate			Rep	Reporting Period						
			Fro	m:		To	<b>)</b> :			
					DATE			AMOUNT		
Full Name of Contributor				МО	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.

**PAGE TOTAL \$**0.00

#### **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.

Name of Filing Committee or Candidate	Reporting F	Period		
DAVID G. ARGALL	From:	11/29/2016	То:	12/31/2016

DATE **AMOUNT** 

Full Name of Contributing Committee			мо	DAY	YEAR	
VOLUNTEERS FOR ARGALL				DAI	ILAK	<b>\$</b> 547.72
Mailing Address PO BOX 241			12	24	2016	, , , , , , , , , , , , , , , , , , , ,
City TAMAQUA	State	Zip Code (Plus 4)			2010	
	PA	18252				

**PAGE TOTAL** Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3. 547.72

### 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	1			Repo	orting Pe	riod			
				Fron	n:		To	):	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address									
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 Sumn	nary 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:		
		<b>'</b>			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	<b>'</b>						<u> </u>	
	- C		<b>.</b> .:	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	Section	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 Per	iod	
DAVID G. ARGALL	From:	11/29/2016 <b>To:</b>	<u>12/31/2016</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R	
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 Candidate				Reporting Period						
			From:			To:				
				DATE			AMOUNT			
Full Name of Contributor			мо	DAY	YEAR					
Mailing Address		_				<b> </b>		0.00		
City	State	Zip Code (Plus 4)								
Description of Contribution:		•	•			•				
Enter Grand Total of Part F on Sche Section 2.	dule II, In-Kind (	Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL			
						\$	(	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	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

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Repo	Reporting Period				
DAVID G. ARGALL From	m <u>11/29/2016</u>	То:	12/31/2016		

		DATE				AMOUNT	
To Whom Paid			мо	DAY	YEAR		
DAVID G. ARGALL			М		ILAK		
Mailing Address 106 LAKE DR			12	24	2016	\$	547.72
City NESQUEHONING	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	18240					
							PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	547.72