

# 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> 2004127		<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> QUIGLEY, TOM COM TO ELECT								
<b>Street Address:</b> 560 PINE ST								
<b>City:</b> ROYERSFORD				<b>State:</b> PA		<b>Zip Code:</b> 19468-2017		
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2004	<b>FILING METHOD ( ) CHECK ONE</b>		<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b> <input type="checkbox"/>	
<b>Name of Office Sought by Candidate:</b>				<b>DATE OF ELECTION</b>		<b>District Number</b>	<b>Office Code</b>	
REPRESENTATIVE IN THE GENERAL ASSEMBLY				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>Party Code</b>	
				11	2	2004	46	
				(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>FOR OFFICE USE ONLY</b>
		1	1	1				
					4	12	2004	
<b>A. Amount Brought Forward From Last Report</b>				\$ 0.00				
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>				\$ 3,815.00				
<b>C. Total Funds Available (Sum Of Lines A and B)</b>				\$ 3,815.00				
<b>D. Total Expenditures (From Schedule III)</b>				\$ 758.15				
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>				\$ 3,056.85				
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>				\$ 0.00				
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>				\$ 2,050.00				

## 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>
QUIGLEY, TOM COM TO ELECT	From: To: <u>4/12/2004</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 805.00

<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>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 2,510.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 2,510.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 0.00
<b>All Other Contributions (Part D)</b>	\$ 500.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 500.00

<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>	\$ 3,815.00
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

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

**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> QUIGLEY, TOM COM TO ELECT	<b>Reporting Period</b> <b>From:</b> <b>To:</b> <u>4/12/2004</u>
---------------------------------------------------------------------------	---------------------------------------------------------------------

<b>DATE</b>	<b>AMOUNT</b>
-------------	---------------

Full Name of Contributor MARK F MCMANUS			MO	DAY	YEAR	\$ 250.00
Mailing Address 194 AZALEA CIR			4	4	2004	
City LIMERICK	State PA	Zip Code (Plus 4) 19468				

Full Name of Contributor PATRICK & JACQUELINE HAHN				MO	DAY	YEAR	\$ 200.00
Mailing Address 573 OLD STATE RD				4	4	2004	
City ROYERSFORD	State PA	Zip Code (Plus 4) 19468					

Full Name of Contributor				MO	DAY	YEAR	\$ 200.00
JAN & LYNN FRITZ							
Mailing Address 104 KOEGAL LANE				4	4	2004	
City	JEFFERSONVILLE	State	Zip Code (Plus 4)				
		PA	19403				

Full Name of Contributor BRIAN & SUSAN QUIGLEY				MO	DAY	YEAR	\$ 200.00
Mailing Address 229 BETHLEHAM PIKE				4	4	2004	
City FORT WASHINGTON	State PA	Zip Code (Plus 4) 19034					

Full Name of Contributor			MO	DAY	YEAR	\$ 200.00
JACOB E. DAILEY						
Mailing Address CCIU #24 535 JAMES HANCE CT			3	19	2004	
City	EXTON	State PA				Zip Code (Plus 4) 19341

Full Name of Contributor HUGH J QUIGLEY			MO	DAY	YEAR	\$ 150.00
Mailing Address 2429 S. 11TH ST.			4	4	2004	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19148				

Full Name of Contributor HELEN & THOMAS QUIGLEY			MO	DAY	YEAR	\$ 150.00
Mailing Address 409 MARKLE ST.			4	4	2004	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19128				

Full Name of Contributor EDWARD & JENNIFER HAHN			MO	DAY	YEAR	\$ 150.00
Mailing Address 1236 E. EVERGREEN DRIVE			4	4	2004	
City PHOENIXVILLE	State PA	Zip Code (Plus 4) 19460				

Full Name of Contributor ANDREW & MARY DECKER			MO	DAY	YEAR	\$ 100.00
Mailing Address 1115 EAST CHESNUT AVE.			4	5	2004	
City JEFFERSONVILLE	State PA	Zip Code (Plus 4) 19403				

Full Name of Contributor ROBERT & SUSAN GLICKMAN			MO	DAY	YEAR	\$ 100.00
Mailing Address 653 GARDEN RD			4	4	2004	
City GLENSIDE	State PA	Zip Code (Plus 4) 19038				

Full Name of Contributor STEVE FELLIN			MO	DAY	YEAR	\$ 100.00
Mailing Address 95 HEARTH STONE CIRCLE			4	4	2004	
City PHOENIXVILLE	State PA	Zip Code (Plus 4) 19460				

Full Name of Contributor GARY SOURA JR.			MO	DAY	YEAR	\$ 100.00
Mailing Address 1985 GENERAL ALEXANDER DR			4	4	2004	
City MALVERN	State PA	Zip Code (Plus 4) 19355				

Full Name of Contributor FRANCIS & DAWN HAHN			MO	DAY	YEAR	\$ 100.00
Mailing Address 6323 EAST VALLEY GREEN RD.			4	4	2004	
City FLOURTOWN	State PA	Zip Code (Plus 4) 19032				

Full Name of Contributor RICHARD & CAROLYN HAHN			MO	DAY	YEAR	\$ 100.00
Mailing Address 312 STURGIS RD			4	4	2004	
City HARLEYSVILLE	State PA	Zip Code (Plus 4) 19128				

Full Name of Contributor BILL & SUZANNE BASILE			MO	DAY	YEAR	\$ 100.00
Mailing Address 254 W. 5TH AVE			4	4	2004	
City COLLEGEVILLE	State PA	Zip Code (Plus 4) 19426				

Full Name of Contributor SHAWN & COLLEEN CONNER			MO	DAY	YEAR	\$ 100.00
Mailing Address 184 APPLGATE DR.			4	4	2004	
City WEST CHESTER	State PA	Zip Code (Plus 4) 19382				

Full Name of Contributor DANIEL & LISA MINCARELLI			MO	DAY	YEAR	\$ 75.00
Mailing Address 7172 WETHERSFIELD DR.			4	4	2004	
City MAINEVILLE	State OH	Zip Code (Plus 4) 45039				

Full Name of Contributor			MO	DAY	YEAR	\$ 75.00
MICHAEL & MEGAN CAGLIOLA						
Mailing Address 644 CROSSHILL RD			4	6	2004	
City ROYERSFORD	State PA	Zip Code (Plus 4) 19468				

Full Name of Contributor				MO	DAY	YEAR	\$ 60.00
JAMES QUIGLEY							
Mailing Address				4	4	2004	
4206 PECHIN ST.							
City	PHILADELPHIA	State	Zip Code (Plus 4)				
		PA	19128				

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

<b>PAGE TOTAL</b>
\$ 2,510.00

## 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 Period	
	From:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					

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

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



**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>  QUIGLEY, TOM COM TO ELECT	<b>Reporting Period</b>  <b>From:</b> <b>To:</b> <u>4/12/2004</u>
-------------------------------------------------------------------------------	-------------------------------------------------------------------------

				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
JOHN QUIGLEY							
<b>Mailing Address</b> 7222 HILL RD				4	4	2004	\$                      500.00
<b>City</b> PHILADELPHIA	<b>State</b>  PA	<b>Zip Code (Plus 4)</b>  19128					
<b>Employer Name</b> CVS				<b>Occupation</b> MANAGER			
<b>Employer Mailing Address/Principal Place of Business</b>  702 CHESTER PIKE			<b>City</b>  PROSPECT PARK	<b>State</b>  PA	<b>Zip Code (Plus 4)</b>  19076		

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

<b>PAGE TOTAL</b>
\$                      500.00

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: To:

			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.

PAGE TOTAL
\$ 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>	
QUIGLEY, TOM COM TO ELECT		<b>From:</b>	<b>To:</b> <u>4/12/2004</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:	To:

				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.							PAGE TOTAL
							\$ 0.00

5/18/2024 8:21:31 AM

# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
QUIGLEY, TOM COM TO ELECT	From To: <u>4/12/2004</u>

DATE				AMOUNT
<b>To Whom Paid</b> EPPS BEVERAGE	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> RIDGE PIKE	4	4	2004	\$ 95.90
<b>City</b> LIMERICK	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19468	<b>Description of Expenditure</b> SUPPLIER OF BEVERAGES FOR FUNDRAISER	
<b>To Whom Paid</b> MOOREHEAD'S CATERING	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 40 FIRST AVE.	4	4	2004	\$ 636.00
<b>City</b> TRAPPE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19468	<b>Description of Expenditure</b> CATERER FOR FUNDRAISER	
<b>To Whom Paid</b> NATIONAL PENN BANK	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> PO BOX 547	3	24	2004	\$ 20.25
<b>City</b> BOYERTOWN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19468	<b>Description of Expenditure</b> CHECKS	
<b>To Whom Paid</b> NATIONAL PENN BANK	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> PO BOX 547	3	31	2004	\$ 6.00
<b>City</b> BOYERTOWN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19468	<b>Description of Expenditure</b> SERVICE CHARGE	
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>				<b>PAGE TOTAL</b> \$ 758.15

## STATEMENT OF UNPAID DEBTS

Name of Filing Committee or Candidate				Reporting Period			
QUIGLEY, TOM COM TO ELECT				From:		To: 4/12/2004	
							Outstanding Balance of Debt
DATE							
Name of Creditor				MO	DAY	YEAR	
THOMAS J. QUIGLEY							
Mailing Address 560 PINE ST. APT. 12				3	17	2004	\$ 50.00
City ROYERSFORD		State PA	Zip Code (Plus 4) 19468	Description of Debt LOAN			
							Outstanding Balance of Debt
DATE							
Name of Creditor				MO	DAY	YEAR	
THOMAS J. QUIGLEY							
Mailing Address 560 PINE ST. APT. 12				3	19	2004	\$ 2,000.00
City ROYERSFORD		State PA	Zip Code (Plus 4) 19468	Description of Debt LOAN			
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL
							\$ 2,050.00